Addressing Adult Social Care Priorities though Planning in Cambridgeshire

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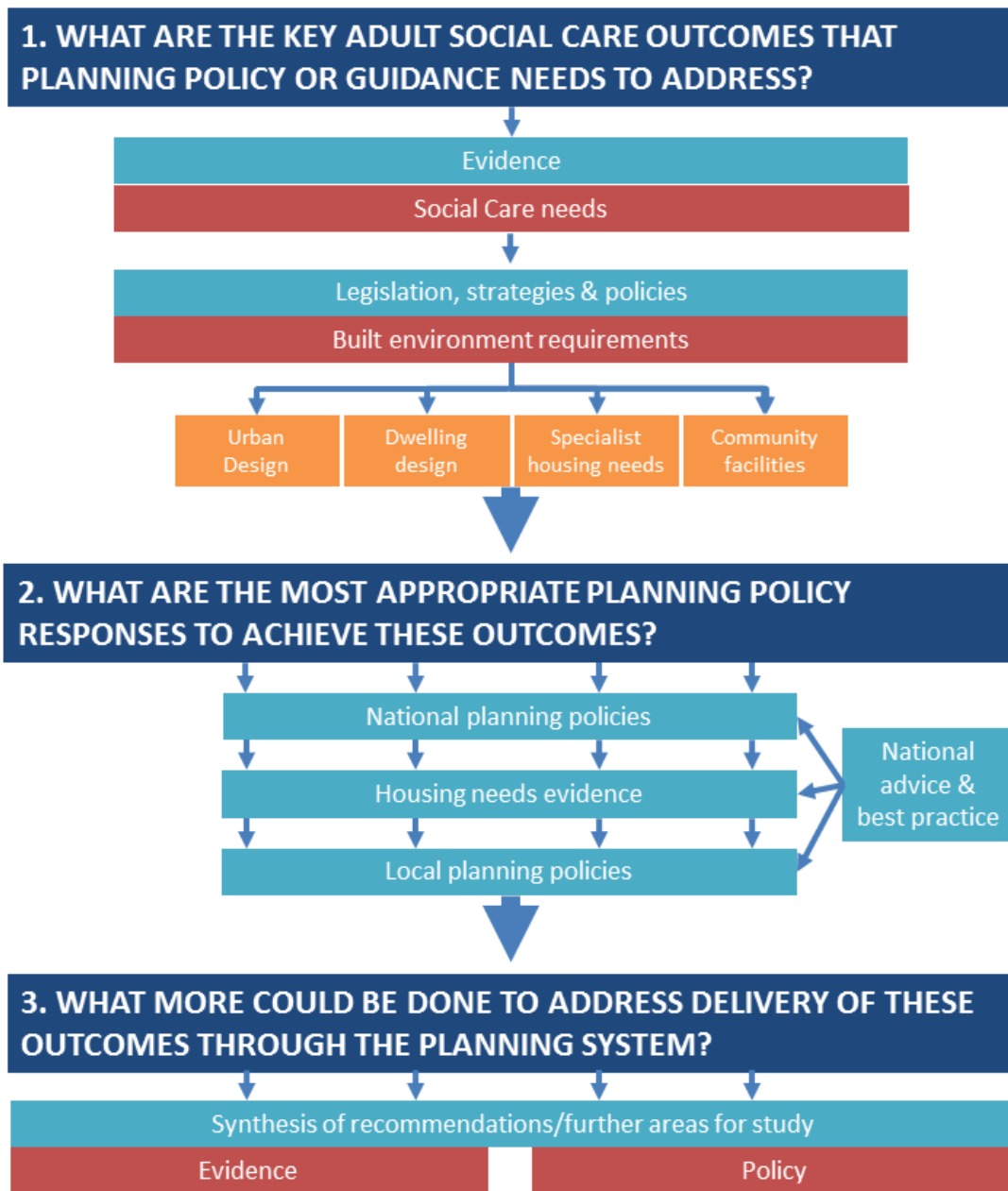
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EXECUTIVE SUMMARY

The flowchart below summarises the structure of this *Addressing Adult Social Care priorities through planning in Cambridgeshire* report; the table on the following page summarises the findings.

STRUCTURE OF THE REPORT

1. WHAT ARE THE KEY ADULT SOCIAL CARE OUTCOMES THAT PLANNING POLICY OR GUIDANCE NEEDS TO ADDRESS?

Evidence

Social Care needs

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Built environment requirements

| Urban Design | Dwelling design | Specialist housing needs | Community facilities |

2. WHAT ARE THE MOST APPROPRIATE PLANNING POLICY RESPONSES TO ACHIEVE THESE OUTCOMES?

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Housing needs evidence

Local planning policies

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3. WHAT MORE COULD BE DONE TO ADDRESS DELIVERY OF THESE OUTCOMES THROUGH THE PLANNING SYSTEM?

Synthesis of recommendations/further areas for study

Evidence

Policy

SUMMARY FINDINGS TABLE

Theme	Evidence /Policy	Recommendation	Lead
Process	Evidence	• Develop standardised section 106 requirements for different scales of development, which could form a starting point for negotiations with developers about viability.	Cambridgeshire County Council Children Families & Adults Directorate (CFA)
		• Work with relevant partners to identify and bring together common social care section 106 'asks' and evidence, in order to strengthen the justification for these features. Within this work-stream, identify whether more specific social care requirements and evidenced justification is needed to achieve Urban design that meets social care needs.	CFA
		• Directly reference supportive national planning policy statements within social care strategies and section 106 social care requirements. In particular, the National Planning Policy Framework (NPPF) and Planning Practice Guidance (PPG)'s strong focus on design provides policy hooks to require specific inclusive neighbourhood design features, if this would help address social care goals.	CFA
	Policy	• Discuss the benefits and practicalities of developing more consistent planning policy approaches across the county that could better address social care challenges.	Local Planning Authorities (LPAs)
Dwelling design/ Specialist housing needs	Evidence	• Work together to ensure that future versions of the Cambridge sub-region Strategic Housing Market Assessment (SHMA) address the NPPF and PPG's specific requirement to move beyond identifying demographic trends to identifying detailed housing needs for older people and those in specific social groups. • Consider ensuring that methodologies for identifying detailed housing needs for older people are sophisticated enough to reflect the range of housing choices open to older people, integrating factors such as income and lifestyle. • When developing methodologies for identifying specialist housing needs, consider involving relevant partner organisations such as the NHS, to ensure that the approaches meet the goals of a such partners, and so that the methodologies have broad support. • If a methodology can be agreed and shown to be robust at a county/HMA level, there may be further benefits in promoting the methodology to partners across a wider area. • Using GIS to map existing provision against current and future needs, as seen previously in the maps of existing provision contained within the JSNA: Older People and Dementia could provide valuable evidence that could help address the PPG's requirements noted above, in particular the location of need for housing of different types. In addition, producing this and other relevant datasets as open data may assist further analysis of need and supply. The forthcoming review of the SHMA provides an opportunity to consider this issue further. • Work with relevant partners to create a robust HMA-wide methodology for demonstrating the need for Requirement M4(2)	LPAs and housing authorities

		(accessible and adaptable dwellings), and / or M4(3) (wheelchair user dwellings), including the required proportion of all homes that should meet these standards. • Discuss how to incorporate, or apply later, an assessment of viability to the assessment of need for optional housing accessibility standards;	
	Policy	• Consider whether there is a need to update existing Local Plan accessible housing policies to meet the new Regulations and Guidance. • To assist the viability of specialist housing to meet identified needs, consider how to address the extraordinary viability considerations of such development, both when setting CIL tariffs, and in section 106 negotiations. • In the short term, it may be beneficial for individual LPAs (or even a number of LPAs working together) to produce a consistent policy statement for how they will interpreting existing accessible housing policies, ahead of any updating of policies. • If there were sufficient agreement, it might be time and resource efficient for the LPAs to work together on some or all of the above actions, with the goal of producing consistently prepared policies across Cambridgeshire (or Cambridge sub-region HMA).	LPAs

	Policy	• Consider the value and practicality of developing more specific and proactive planning policies for residential care and specialist housing, perhaps building upon the approach taken in Huntingdonshire;
		• Within the above approach, the Local Planning Authorities may wish to consider:
		   o The need to allocate specific sites for older people's housing in central locations;
		   o Whether future SHLAAs could include assessments of how appropriate sites are for meeting specialist housing needs, in order to inform future site allocations;
		   o How plan policies can support provision of a variety of different housing models for older people, in order to provide sufficient range of attractive housing options;
		   o Agreeing a countywide or HMA-wide approach to classifying specialist housing for older people;
		   o Including specific monitoring indicators for specialist housing within Local Plans;
		• Use the Housing Standards Review as an opportunity to review: the benefits of including accessible housing standards in Local Plan policies, the evidence required to support such policies; and the benefits/practicality of developing a more consistent approach to these across the county;
			LPAs

Other		• The PPG's reference to impact assessments provides a policy hook to promote inclusion of impact assessment policies, such as health impact assessments (which could include impacts on those with social care needs), within Local Plans.	LPAs

INTRODUCTION

This project considers appropriate and practical planning approaches in Cambridgeshire to addressing adult social care requirements, with particular regard to older peoples' needs[1].

BACKGROUND

Addressing the housing and other social care support needs of a growing and ageing population is a critical challenge for Cambridgeshire. This project considers how, within the current and emerging national policy context, spatial and land-use planning can be used most effectively to help address this challenge.

External challenges

A number of external challenges are placing increasing pressure on social care services in Cambridgeshire:

- The UK (and the western world more widely) is experiencing many more people living for longer, a trend which is set to continue. This will place increasing pressure on services such as health and social care.
- Cambridgeshire's population has been and remains one of the fastest growing of all the counties in the country. This fast pace of population growth will place intense pressure on Cambridgeshire's health and social care services – and in particular pressure on services for older people - because:
  - mirroring the national trend, in the future older people will comprise a greater proportion of the overall population. Increasing numbers of people within this social group will therefore require health and social care; and
  - the number of people with social care needs not associated with an ageing population will increase in line with future population growth.
- In response to the global financial crisis and national debt, the UK government is continuing to reduce public sector spending, which has a continuing impact on local authority service budgets, including those for social care.

Current policy approaches

Current national and local policy approaches highlight the role that the physical environment can play in supporting health and social care outcomes:

- The national health and social care policy agenda, crystallised in the Care Act 2014, focuses on delivering outcomes rather than services, with the concept of wellbeing (including independence) at its centre. The identified ways of achieving this outcome include: personalisation of care; integration of support across a range of sectors; and prevention, ensuring that people avoid reaching crisis point[2]. Design of the physical environment is explicitly referenced in the Care Act's guidance as one way in which a range of sectors can support people's wellbeing, and is particularly important in enabling independence.
- Cambridgeshire health and social care approaches reflect the national outcomes-focused approach[3], including emphasising cross-agency/sector working, and

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[1] To be clear, the focus of this report is on Adult Social Care needs, with a particular emphasis on the needs of older people, given the demographic challenges highlighted in this report and elsewhere. All other CCC people focused support requirements, such as children's social care, for the built environment are identified from the CCC Strategy for Supporting New Communities forms discussed in chapter 1 for the sake of completeness. However, these requirements are not discussed in detail thereafter.

[2] Care and Support Statutory Guidance Issued under the Care Act 2014

acknowledging the impact of wider determinants of health[4], including the physical environment, upon individuals' health and wellbeing.

Planning context

Current national planning policy and guidance promote the role of the built environment in supporting healthy communities:

- National planning policy, via the National Planning Policy Framework (NPPF), acknowledges the role that the built environment can play in facilitating healthy communities[5];

- More specifically, the NPPF requires Local Planning Authorities (LPAs) to identify and address the need for all types of housing, including affordable housing and the needs of different groups in the community, including older people and people with disabilities[6];

- On the other hand, the economic context noted above has led to an increasing national planning policy and guidance focus on ensuring development viability[7], placing pressure upon Local Planning Authorities to reduce the number of planning requirements, such as for design standards. Driven by the same focus on development viability, and by reducing regulatory burdens imposed on industry, the government's response to the Housing Standards Review proposes to reduce the number of design standards that planning authorities can require[8].

Summary of issues

To summarise, in the future Cambridgeshire County Council's (CCC) Social Care services will have to support more people with less money. Current policy approaches to tackle these issues focus upon enabling those with social care needs to be independent; an approach which can be supported through the design of the physical environment. National planning policy recognises the health-supporting role of the physical environment but responds to the wider economic context by prioritising development viability, which may limit the requirements that planning authorities may place on developers.

Based upon the above discussion, creating a physical environment that supports social care users to live independently is a current priority for health and social care services in Cambridgeshire.

CURRENT WORK IN CAMBRIDGESHIRE AIMING TO ADDRESS THE ISSUES OUTLINED ABOVE

Given the commonly acknowledged importance of the issues outlined above, public sector and other partners in Cambridgeshire are currently working on parallel and complementary work-streams to assess and meet the built environment needs of social care users. These

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[3] See Cambridgeshire County Council's Transforming Lives Strategy and Cambridgeshire Older People Strategy, for example.

[4] See Cambridgeshire County Council's Health and Wellbeing Strategy 2012-17, for example.

[5] See National Planning Policy Framework section 8, for example.

[6] National Planning Policy Framework para. 159.

[7] See National Planning Policy Framework paragraph 173, for example.

[8] Department for Communities & Local Government 2014. Note supporting Written Ministerial Statement regarding the Housing Standards Review outcome.

are outlined here in order to place this report in context. The report's focus in the context of these work-streams is then outlined below.

CAMBRIDGESHIRE COUNTY COUNCIL STRATEGY FOR SUPPORTING NEW COMMUNITIES 2015

- The Strategy for Supporting New Communities[9] sets out the vison and principles for how the CCC will support people in new communities, which are discussed in more detail in the main body of this report.
- Recognising that each new community is different and to ensure flexibility based on local needs the Strategy does not detail exactly how new communities should be supported but rather bases the strategy on guiding principles and outcomes to shape support in new communities. There is, however, a need for CCC to provide a formally stated evidence base to support future requests for funding and influence planning applications. Therefore, strategy is accompanied by the Supporting New Communities Level of Requirements Framework. The Framework identified the relevant statutory duties and policies and advises on the level of provision needed in the new community dependent on the predicted need created by the development.
- The Strategy does not cover all functions of the CCC in the planning of new communities but is rather exclusively focused on people-centred support.

'HOUSING FOR OLDER PEOPLE IN 2035: A CAMBRIDGESHIRE CASE STUDY'

- The South Cambridgeshire District Council Director of Housing is currently developing a PhD on housing for older people in Cambridgeshire. The PhD uses the Housing our Ageing Population Panel for Innovation (HAPPI) report 2009 as its starting point, and aims to provide a comprehensive analysis of relevant issues, including answering the following headline questions:
  - What is the current supply of housing within Cambridgeshire of homes designed to meet the needs of older people?
  - Is the current analysis of demographic projections sophisticated enough to identify what housing supply is required in the future?
  - How does this link to what is currently known about the health and support needs of older people within Cambridgeshire?
  - What needs to happen to ensure that the planning system and the building industry are able to deliver the range and number of homes needed?
  - What are the funding issues associated with providing the homes needed?
- The main practical output from the PhD will be a new Cambridgeshire Housing Strategy, with a new Older People's Housing Strategy and Extra Care Housing Strategy as important component parts of this.

WORK TO UPDATE THE CAMBRIDGE SUB-REGION STRATEGIC HOUSING MARKET ASSESSMENT

- The Cambridge Sub-region Strategic Housing Market Assessment (SHMA) sets out evidence relating to the housing needs of households in all social groups for

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[9] The Strategy for Supporting New Communities was approved by the General Purpose Committee in September 2015.

the Cambridge Housing Market Area[10]. Recent national planning policy has changed the emphasis of this significant evidence source, the impacts of which are discussed below in the main body of the report.

- Current work on the SHMA is focusing on identifying future specialist housing needs. The results of this will feed into the spreadsheets supporting the County Council's Strategy for Supporting New Communities discussed above, and will also inform the forthcoming Extra Care Housing Strategy.

MAPPING OF SUPPORTED ACCOMMODATION IN THE CAMBRIDGE HOUSING MARKET AREA

- As a part of the Cambridgeshire Open Data project, the Cambridge sub-regional Housing Coordinator is working with partners to develop a comprehensive dataset of supported accommodation in the Cambridge Housing Market Area, "harvesting" information held in existing directories of supported accommodation.
- When complete, a mapping tool using the dataset will enable local residents to see where provision is, helping them make informed choices about moving to and between supported accommodation. The evidence should also be a valuable resource to inform spatial assessments of future need for extra care housing, when brought together with geographical evidence of needs.

THE FOCUS OF THIS REPORT

This report will seek to add value to the projects set out above by applying a planning focus to the issues they address. It will consider how built environment outcomes addressing Adult Social Care needs can be: (a) identified using robust evidence, and (b) delivered through local policies and practice, in a way that meets the requirements of national planning policy as well as the needs of other partners.

In doing this, the report aims in particular to help answer one research question from the Housing of Older People in 2035 project: "what needs to happen to ensure that the planning system and building industry are able to deliver the range and number of homes needed?"

The development industry's response to planning for social care is not examined in this report; the Housing of Older People in 2035 project will do this in depth. Similarly, while the issue of viability is discussed briefly in this report, it is beyond its scope to go into this in detail. The report's recommendations highlight the need for further work in this area.

RESEARCH QUESTIONS

Main research question

How might social care needs, with particular regard to older people's needs, be addressed in Cambridgeshire through appropriate and practical planning approaches?

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[10] The Cambridge Housing Market Area includes seven districts: the five Cambridgeshire districts of Cambridge, East Cambridgeshire, Fenland, Huntingdonshire and South Cambridgeshire, and also the two West Suffolk districts of Forest Heath and St Edmundsbury.

Sub-questions

1. **WHAT ARE THE KEY ADULT SOCIAL CARE OUTCOMES THAT PLANNING POLICY OR GUIDANCE NEEDS TO ADDRESS?**
   - What needs do national and local evidence identify for social care provision with respect to the built environment, and what evidence approaches are used to identify those needs?
   - What impact do relevant health and social care legislation, policy and strategies have on addressing these needs?
   - What are the desired built environment requirements that address the needs and strategies identified above?

2. **WHAT ARE THE MOST APPROPRIATE PLANNING POLICY RESPONSES TO ACHIEVE THESE OUTCOMES?**
   - What do national planning policies say in relation to the desired built environment requirements that address social care needs?
   - What does local evidence say in relation to these national planning policy requirements?
   - What do local planning policies say in relation to the desired built environment requirements and national planning policy requirements?

3. **WHAT MORE COULD BE DONE TO ADDRESS DELIVERY OF THESE OUTCOMES THROUGH THE PLANNING SYSTEM?**
   - Based upon the analysis above:
     - How could local evidence better address the desired built environment requirements?
     - How could local planning policy better address the desired built environment requirements?

SETTING THE SCOPE OF THE STUDY: DEFINING ADULT SOCIAL CARE

This study uses the Cambridgeshire County Council Transforming Lives Strategy[11] and the Cambridgeshire Older People Strategy[12] to help define its scope. These documents set out new approaches to Adult Social Care that are increasingly proactive, preventative and personalised. The aims are to enable the residents of Cambridgeshire to exert choice and control and ultimately continue to live – to the fullest extent possible – healthy, fulfilled, socially engaged and independent lives.

The vision for the new way of working is to:

- enable people to live independently
- support people in a way that works for them
- support the development of strong, connected communities
- recognise the strengths of individuals, families and communities and build upon these
- work in partnership to achieve this

What are the implications for this report?

The Cambridgeshire vision sets out a focussed goal to create connected, sustainable communities that support vulnerable people to remain independent, rather than only providing support when people reach a serious level of need. With effective long term planning, preventative initiatives and partnership working many people can be prevented from entering longer term adult social care. If action can be taken early and this helps people at risk of reaching a crisis, more serious situations can be avoided, so that people can live independently for longer. Additionally, with high quality information and community support, when a crisis does take place the individual can be much better supported.

This community focussed approach has clear implications for how planning can help address social care needs in an area. The planning system plays an important role in facilitating social interactions and creating healthy, inclusive communities. Following on from this, because this model requires strong and efficient partnership working, this study will consider evidence and policies from a range of sectors including social care, health, and housing, as well as planning.

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[11] Cambridgeshire County Council Transforming Lives Strategy
http://www.cambridgeshire.gov.uk/info/20166/working_together/579/delivering_the_care_act/3
[12] Cambridgeshire Older People Strategy
http://www.cambridgeshire.gov.uk/info/20166/working_together/577/strategies_and_plans

For further discussion of these issues see Appendix 1.

1. WHAT ARE THE KEY ADULT SOCIAL CARE OUTCOMES THAT PLANNING POLICY OR GUIDANCE NEEDS TO ADDRESS?

In order to identify the key adult social care outcomes that planning policy or guidance needs to address in Cambridgeshire, it is necessary to answer the following questions:

- What needs do national and local evidence identify for social care provision with respect to the built environment, and what evidence approaches are used to identify those needs?
- What impact do relevant health and social care legislation, policy and strategies have on addressing these needs?
- What are the desired built environment requirements that address the needs and strategies identified above?

WHAT NEEDS DO NATIONAL AND LOCAL EVIDENCE IDENTIFY FOR SOCIAL CARE PROVISION WITH RESPECT TO THE BUILT ENVIRONMENT, AND WHAT EVIDENCE APPROACHES ARE USED TO IDENTIFY THOSE NEEDS?

Cambridgeshire County Council's approach to identifying social care users' needs, and the corresponding built environment requirements

Cambridgeshire County Council's Children, Families & Adults (CFA) and New Communities teams work to ensure that CFA services are prepared for new communities. The New Communities Team are responsible for preparing for all areas of growth including responding to planning applications, however they primarily focus on strategic growth sites as these place the greatest pressure on service provision.

THE STRATEGY FOR SUPPORTING NEW COMMUNITIES SETS OUT HOW CCC (NOT JUST CFA) WILL SUPPORT PEOPLE MOVING INTO NEW COMMUNITIES ACROSS CAMBRIDGESHIRE AND INCLUDES AN EVIDENCE BASE FOR IDENTIFYING FUTURE SOCIAL CARE NEEDS IN THE NEW COMMUNITY.

Evidence of quantitative needs

The Supporting New Communities Level of Requirement Framework (part of the Strategy for Supporting New Communities) identifies (mostly quantitative) social care needs for new communities, using a number of approaches:

- Demographic-led approaches based upon local evidence (e.g. estimated number of older people, taken from Cambridgeshire County Council's 2013 summary of evidence from new development surveys, 2006-12);
- Demographic-led approaches based upon generalised national evidence (e.g. estimated proportion of new community population to be a carer, Carers' Trust national report);
- Demographic-led approaches using national evidence for the local area (e.g. estimated proportions of Cambridgeshire's future population with a mental health disorder, taken from Projecting Adult Needs & Service Information System (PANSI), 2014);

- Case-led approaches (e.g. estimated number of children's cases, based upon front-line experience);
- Qualitative and quantitative evidence showing high prevalence of need in new communities (e.g. evidence that new communities have a larger proportion of the community who are children, compared to the rest of Cambridgeshire, taken from The Impact of new Communities on County Council Budgets, Cambourne Case Study, Cambridgeshire County Council, 2012).

A table setting out summaries of the needs identified and the evidence sources used is provided in the table below:

Summary of evidence	Evidence source
Estimated proportion of new community population to be a carer	Carers Trust
Evidence that new communities are especially prone to social issues	Goh 2007, CCC Member Led Review; September 2010.
Estimated proportions of Cambridgeshire's future population with a mental health disorder	PANSI, 2014
Estimated number of children's social care and locality cases in new communities	CCC front-line data
Evidence of high rates of mental health and domestic violence problems in new communities	CCC, 2010, front-line experience
Evidence that new communities have a larger proportion of the community who are children, compared to the rest of Cambridgeshire	CCC, The Impact of new Communities on County Council Budgets, Cambourne Case Study, 2012
Estimated proportion of new community population to have a mental health disorder	CCC 2010
Estimated number of older people in the new community	2006-2012 New Development Survey Cambridgeshire County Council, 2013
Estimated proportion of new community population to have a learning disability	PANSI/POPPI 2014
Estimated proportion of new community population to have a physical disability	-PANSI 2014
Estimated number of domestic abuse cases in new communities	-Cambridgeshire Domestic Abuse Needs Assessment 2014
Evidence of high rates of children's social care needs in new communities	-CCC front line data
Estimated number of children of different ages in new communities	-CCC Child Yield Calculator

It is not the purpose of this study to consider the specific scale of needs identified in the Supporting for Supporting New Communities. Instead, an example is provided below of how the evidence sources are used to predict the scale of needs in certain groups:

Approximately 16% of 18-64 year olds in Cambridgeshire are predicted to have a common mental health disorder (PANSI, 2014) and 10% of 5-16 year olds will have a clinically diagnosable mental health disorder (CCC/NHS). Therefore it can be estimated that Northstowe phase 2 will home at least 994 adults and 255 children and young people with a mental health problem[13].

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[13] Cambridgeshire County Council, CFA, estimated mental health need created by Northstowe phase 2

WHAT IMPACT DO RELEVANT HEALTH AND SOCIAL CARE LEGISLATION, POLICY AND STRATEGIES HAVE ON ADDRESSING THESE NEEDS?

This section sets out themes identified by health and social care legislation, policy and strategies relevant to the planning system, in order to understand the context within which local policies seek to address the social care challenges identified in the previous section.

At a national level, the sources considered include:
- Budget 2015,
- Care Act 2014,

At a Cambridgeshire Level, the strategies considered include:
- Cambridgeshire Health & Wellbeing Strategy 2012-17,
- Cambridgeshire County Council Business Plan,
- Cambridgeshire County Council Strategy for Supporting New Communities
- Cambridgeshire County Council Operating Model.

Given that the focus of this study is upon the planning system's relationship with social care goals, rather than on social care policy itself, only a brief summary of the relevant themes arising from the legislation, policies and strategies listed above is provided here. The themes arising from these documents are discussed further at Appendix 2.

Taken together, the national and local legislation, policies and strategies listed above reflect the challenges of meeting the needs of a growing and ageing population, within the context of less funding being available for service provision.

National and local policy responses are also aligned in their responses to these challenges, focusing upon:

- **Wellbeing** – an outcomes-focused approach recognising the wider determinants of health. Integral to this definition of wellbeing is the goal of promoting
- **Independent living** – preventing, reducing and delaying needs; which can be supported by
- **A supportive physical environment** – a choice of quality homes, neighbourhood design promoting active lifestyles, accessible community infrastructure provision, and access to education, employment services and facilities. Delivering a supportive built environment, as one of many determinants of health and wellbeing, requires
- **Integration of services**, including with planning.

Out of the documents referenced above, a number of features from the CCC Strategy for Supporting New Communities are particularly relevant to identifying social care requirements for the built environment in Cambridgeshire. Within section 5 *How will we know we have been successful?* a number of features are listed of communities that are safe, resilient and independent, healthy, and reaching their full potential. Among these, several relate to the built environment (comments added by the report author in Italics):

- o Safe and accessible infrastructure;
- o Low levels of risky behaviour, crime and anti-social behaviour – *these attributes can be influenced by neighbourhood design features such as Secured by Design*;

- Choice of quality homes required to meet the needs of present and future generations;
- Good quality shared space and community facilities;
- Accessible services;
- People who are active and there is a high participation in sport and cultural events; – *as with crime, the neighbourhood environment can enable and promote active lifestyles*;
- Sufficient quality early years, school and post 16 places near to where people live;
- Adults can readily access quality skills and community learning opportunities – *design of the built environment and sustainable transport provision can enable access to services and education and employment.*

Evidence justifying proposed responses to identified needs

The national and local evidence, policy and strategies noted above inform the service delivery approaches to social care that the County Council takes. In turn, these approaches inform the section 106 requirements aiming to address social care challenges, which will be discussed below.

The Strategy for Supporting New Communities uses national and local evidence to justify the proposed planning responses discussed below. A variety of evidence/justification is provided, including:

- Statutory requirements for certain types of infrastructure/service provision (e.g. Statutory requirement for children's centre service provision from the Child Care Act 2006);
- Government evidence highlighting the benefits of particular approaches (e.g. Government Strategy No Health Without Mental Health 2011);
- Local evidence supporting particular policy approaches (e.g. justification for adaptable housing need in Cambridgeshire, taken from Cambridgeshire Joint Strategic Needs Assessment: New Communities, 2010);
- Local strategies/policies supporting particular policy approaches (e.g. focus on prevention and early intervention, taken from Cambridgeshire County Council, 201 Transforming Lives Strategy).

A table summarising the justifications for proposed planning responses is provided at Appendix 3: Summaries of justifications for proposed planning responses.

A wide range of national and local sources are used to justify the proposed planning responses to social care needs discussed below. An important question is whether the CFA New Communities team is asked to justify particular requirements, and whether additional or enhanced evidence would be useful in overcoming this. The theme of strengthening the evidence base is explored in the sections below.

WHAT ARE THE DESIRED BUILT ENVIRONMENT OUTCOMES THAT ADDRESS THE NEEDS AND STRATEGIES IDENTIFIED ABOVE?

Proposed planning responses

A number of proposed Cambridgeshire County Council planning responses to the social care challenges can be identified. These are based on the requirements from different service areas within the Cambridgeshire County Council people centred support services, including, for example: Adult Social Care (Support for Older People, Children's Social Care, Mental Health support, Library Services, Public Health and Enhanced and Preventative Support.

The requirements for the different service areas overlap and compliment one another, and can be categorised into the following themes:

- Urban design,
- Dwelling design,
- Specialist housing needs,
- Community facilities that are accessible to all,
- Staff,
- Funding,

The above themes are used as a structure for considering the research questions within this study.

The table below provides examples listed under each theme:

CCC sub-theme	Text summary
1. **Urban design**	- which promotes positive mental health, promoting active travel and social interactions - which is accessible to all - locating specialist housing in locations with easy access to community facilities
2. **Dwelling design**	Providing an appropriate proportion of homes that are adaptable/accessible
3. **Specialist housing needs, including:**	- Residential care facilities for older people - Specialist accommodation for adults with additional needs - Extra care facilities - Supported living cluster flats
4. **Community facilities that are accessible to all, including:**	- Large activity/meeting spaces - Access to touch down space - Features meeting specific needs such as buggy parking, hearing loop enabled - Accessible parking facilities
5. **Staff, including:**	- Social Workers - Case workers for domestic abuse victims - Family workers and other locality staff - Community development workers - Specialist Mental Health - Youth workers - Children Centre workers
6. **Funding for the**	Setting up groups and running activities

purpose of:	• Work with families • Furnishing of a children's centre

ANALYSIS

Analysis of the Strategy for Supporting New Communities above highlights the following overarching and specific issues:

OVERARCHING ISSUES

- What social care requirements would the County Council want to see in Local Plan policies?
- As noted above, the various requirements overlap and complement one another; this raises the question of whether there may be overlaps and complementary 'asks' coming from other County Council directorates, and from external partners such as the NHS. If 'asks' common to several service areas and partners can be identified early on in the process and justified on several counts, this might increase the chances of obtaining the required levels of section 106 funding.

RECOMMENDATIONS/AREAS FOR FURTHER STUDY

The analysis above suggests that it may be worthwhile considering the following actions:

- Develop social care 'asks' for Local Plan policies in order to inform the next round of Local Plan-making. This issue is explored in detail in the later part of this report.
- Work with relevant partners to identify and bring together common social care requirements and evidence, in order to strengthen the justification for these features. Within this work-stream, identify whether more specific social care requirements and evidenced justification is needed to achieve urban design that meets social care needs.
- Work with relevant partners to develop a methodology for identifying a required proportion of homes that should be adaptable / accessible in new developments.

2. WHAT ARE THE MOST APPROPRIATE PLANNING POLICY RESPONSES TO ACHIEVE THESE OUTCOMES?

Having explored the evidence for social care support, social care policy priorities and the support requirements arising from these, this section examines the interaction of those social care support requirements with national and local planning policies. In particular, the following questions will be considered:

- What do national planning policies say in relation to the desired built environment requirements that address social care needs?
- What does local evidence say in relation to these national planning policy requirements?
- What do local planning policies say in relation to the desired built environment requirements and national planning policy requirements?

WHAT DO NATIONAL PLANNING POLICIES SAY IN RELATION TO THE DESIRED BUILT ENVIRONMENT REQUIREMENTS THAT ADDRESS SOCIAL CARE NEEDS?

NATIONAL PLANNING POLICY FRAMEWORK AND PLANNING PRACTICE GUIDANCE

SOURCE

National planning policy is set out in the National Planning Policy Framework (NPPF), supplemented by further detail in Planning Practice Guidance (PPG).

SUMMARY OF CONTENT

The NPPF identifies a number of principles relevant to social care goals, which can be categorised into some of the social care built environment themes identified above (urban design, dwelling design, specialist housing needs and community facilities). In addition, a small number of principles relate to the planning process rather than to built environment outcomes.

Of particular note is the statement in paragraph 159 that the Strategic Housing Market Assessment should be *the* evidence vehicle for identifying housing needs (emphasis added):

Local Planning Authorities should have a clear understanding of housing needs in their area. They should:

- *prepare a Strategic Housing Market Assessment to assess their full housing needs, working with neighbouring authorities where housing market areas cross administrative boundaries. The Strategic Housing Market Assessment <u>should identify the scale and mix of housing and the range of tenures that the local population is likely to need over the plan period which</u>:*

- *meets household and population projections, taking account of migration and demographic change;*
- *addresses the need for all types of housing, including affordable housing and the needs of different groups in the community (such as, but not limited to, families with children, older people, people with disabilities, service families and people wishing to build their own homes); and*
- *caters for housing demand and the scale of housing supply necessary to meet this demand;*

The summarised principles identified in the NPPF are listed in the table below. Full text is included at Appendix 4.

CCC sub-theme	Text summary
0.1 Process	Plan to meet health and wellbeing goals
0.1 Process	Work with relevant health partners
1. Urban design	Seek to secure high quality design
1. Urban design	Create safe and accessible environments
1. Urban design	Places should promote social interaction
1. Urban design	Create safe environments
1. Urban design	Create accessible developments that promote active use of public areas
1. Urban design	Planning's social role in supporting healthy communities
1. Urban design	Planning should promote active travel and use of public transport
1. Urban design	Location of housing and other uses should be integrated
1. Urban design	Plan for multifunctional green open space
2. Dwelling design	Mix of housing to meet the needs of different groups in the community
3. Specialist housing needs	Mix of housing to meet the needs of different groups in the community
4. Community facilities	Plan to support provision of community facilities
4. Community facilities	Assess quality and capacity of health and social care infrastructure, among other facilities

Planning Practice Guidance sets out a number of requirements relevant to social care goals which add more detail to the principles identified above. As with the NPPF, these requirements can be categorised into the above mentioned social care built environment themes, with one requirement relating to the planning process rather than built environment outcomes. Text summaries of PPG requirements relating to social care goals are provided in the table below. Full text is included at Appendix 5: PPG requirements relevant to social care goals.

CCC sub-theme	Related NPPF principle	PPG text summary
0.1 Process	Work with relevant health partners	Planners should work with the Director of Public Health, the Health & Wellbeing Board, the local Clinical Commissioning Groups and NHS England, and the local community to support healthy and well communities.
1. Urban design	Seek to ensure high quality design that meets the needs of all	Development proposals should promote accessibility and safe local routes by making places that connect appropriately with each other and are easy to move through

CCC sub-theme	Related NPPF principle	PPG text summary
1. Urban design	Create safe and accessible environments	Urban design should be accessible and understandable to all, and should enable efficient travel.
1. Urban design	Create safe and accessible environments	Designing out crime and designing in community safety should be central to the planning and delivery of new development.
1. Urban design	Seek to ensure high quality design that meets the needs of all	Urban design should be flexible to respond to changing circumstances and demands.
1. Urban design	Plan for multifunctional green open space	LPAs should integrate climate change adaptation and mitigation, looking for win-win approaches such as multi-functional green infrastructure.
1. Urban design	Plan for multifunctional green open space	A system of open and green spaces that respect natural features and are easily accessible can be a valuable local resource and helps create successful places.
1. Urban design	Plan for multifunctional green open space	Sufficient green infrastructure should be designed into a development to make the proposal sustainable.
1. Urban design	Plan for multifunctional green open space	Open space should be taken account of in planning, given the multiple benefits it provides including health. LPAs should assess needs and plan for open space, across administrative boundaries if necessary.
1. Urban design	Create safe and accessible environments	Urban design, including patterns of development promoting active lifestyles, multifunctional greenspace, environments which promote social interaction, are accessible to all and are adaptable for those with extra needs, can enable the development of a healthy community.
1. Urban design	Create safe and accessible environments	Good design works for everyone, looks good, lasts well and will adapt to the needs of future generation.
1. Urban design	Seek to secure high quality design that meets the needs of all	Inclusive design, considering those with extra needs such as disabled people and older people, should be considered at every stage of the development process, including the early design stage.
1. Urban design	Create safe and accessible environments	Inclusive design relates to the urban environment, not just to buildings.
1. Urban design	Mix of housing to meet the needs of different groups in the community	Healthy communities are influenced by community cohesion.
1. Urban design	Create safe and accessible environments	A well designed place should be intuitive, comfortable, safe and equally easy for all to use

CCC sub-theme	Related NPPF principle	PPG text summary
1. Urban design	Create safe and accessible environments	When considering pedestrians plan for wheelchair users and people with sensory or cognitive impairments. Legible design, which makes it easier for people to work out where they are and where they are going, is especially helpful for disabled people.
1. Urban design	Mix of housing to meet the needs of different groups in the community	A good mix of uses and tenures is often important to making a place economically and socially successful, ensuring the community has easy access to facilities, reducing the need to travel, and allowing communities and places to respond to changes in the use of buildings and spaces.
1. Urban design	Plan to meet health and wellbeing goals	To support healthy communities and provide sufficient healthcare infrastructure, plan makers and decision takers should: help create healthy living environments; promote health, social and cultural wellbeing and support the reduction of health inequalities; consider local health and wellbeing strategies; consider healthcare infrastructure implications of new development; make developments that are accessible to all.
2. Dwelling design & 3. Specialist housing needs	Mix of housing to meet the needs of different groups in the community	Assessments of housing need should consider the future needs of older people, using relevant evidence to identify need broken down by tenure and type, and including the level of need for residential institutions.
2. Dwelling design & 3. Specialist housing needs	Mix of housing to meet the needs of different groups in the community	Assessments of housing need should consider the future needs of disabled people, using relevant evidence to identify need.
2. Dwelling design	Mix of housing to meet the needs of different groups in the community	Plan makers should examine current and future trends of population and household groups, current housing stock size and tenure.
4. Community facilities	Assess quality and capacity of health and social care infrastructure, among other facilities	Consider health & wellbeing and health infrastructure, working with relevant partners, when making plans and in planning decision making
7. Impact assessments		A health impact assessment may be a useful tool to use where there are expected to be significant impacts.

ANALYSIS

Analysis of NPPF principles and PPG requirements in relation to health and social care identify the following issues relating to built environment outcomes, the process for achieving these, and the role of the SHMA:

BUILT ENVIRONMENT REQUIREMENTS

- Policy hooks are included within the NPPF and PPG which support all of the social care built environment requirements identified above, including urban design, dwelling design and community facilities Both the NPPF and PPG have a particularly strong focus on design, including the need for inclusive design to create accessible neighbourhoods.

PLANNING PROCESS

- Both the NPPF and PPG place strong emphasis on the need for partnership working, in particular between planning authorities and health partners. On the related theme of integration of policy goals, the PPG also emphasises the need to identify 'win-win approaches'[14] with 'multiple benefits',[15] such as multi-functional green space.
- The PPG includes the point that impact assessments may be a useful tool where there are expected to be significant impacts.

ROLE OF THE SHMA

- As noted above, the NPPF identifies the SHMA as *the* evidence source for housing need. The PPG explicitly refers back to this principle, stating in the Housing and economic needs assessments section, 'the assessment of housing and economic development needs includes the Strategic Housing Market Assessment requirement as set out in the National Planning Policy Framework'.[16]
- Both the NPPF and PPG set out a role for the SHMA in identifying specialist housing needs. The NPPF states that the SHMA should address 'the need for all types of housing',[17] and within the detailed requirements for housing needs assessments, the PPG specifically states that housing need assessments should set out the scale of need for residential institutions[18] and sets out in detail methods of identifying the housing needs of households with specific needs, such as disabled people.[19] The requirements for the SHMA are discussed in further detail in a section below.

RECOMMENDATIONS/AREAS FOR FURTHER STUDY

- The NPPF and PPG's support for all of the social care built environment requirements identified in the Strategy for Supporting New Communities means that the justification for these local requirements would be given added weight by directly referencing these supportive national policy statements.
- The NPPF and PPG's identification of the SHMA as the central evidence source for housing need, and the requirement to consider specialist housing needs within this evidence document, strongly suggest that the outputs of work to identify social care housing needs should be included in the Cambridge sub-region SHMA. Consideration should be given to identify how best to incorporate this new content. within the SHMA[20]. The NPPF and PPG's strong focus on design provides policy hooks to require specific inclusive neighbourhood design features, if this would

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[14] Planning Practice Guidance, Paragraph: 004 Reference ID: 6-004-20140612

[15] Planning Practice Guidance, Paragraph: 017 Reference ID: 26-017-20140306

[16] Planning Practice Guidance, Paragraph: 001 Reference ID: 2a-001-20140306

[17] NPPF paragraph 159

[18] Planning Practice Guidance, Paragraph: 021 Reference ID: 2a-021-20140306

[19] Planning Practice Guidance, Paragraph: 021 Reference ID: 2a-021-20140306

[20] This is especially relevant and timely, given that discussions are ongoing about the future shape of the SHMA.

help address social care goals.
- The NPPF and PPG's focus on partnership working and on identifying win-win approaches provides a strong rationale for working with a wide range of partners to identify common and complementary goals that could mutually support section 106 and/or policy requirements, such as specific design features.
- The PPG's reference to impact assessments provides a policy hook to promote inclusion of impact assessment policies, such as health impact assessments (which could include impacts on those with social care needs), within Local Plans.

VIABILITY AS A TOPIC WITHIN THE NPPF AND PPG

SUMMARY OF CONTENT

In addition to including policy statements supporting CCC goals, the NPPF and PPG also have a strong focus on supporting the viability of development. Principles and requirements included in these documents state that planning should support rather than impede economic growth, and in particular that the cumulative effect of planning policy requirements should not threaten the viability of development (e.g. NPPF paragraph 174).

ANALYSIS

As a single service area aiming to meet its service users' needs through positive planning policies, CCC does not have a strong influence on the cumulative total policy requirements placed upon development. However, the strength of viability policy requirements within national planning policy highlights the need for CCC requirements to be robustly evidenced and justified. In addition, this challenge adds weight to the benefits of working with other partners to identify shared and complementary goals and built environment requirements.

On the broader issue of ensuring the viability of development, housing for older people and specialist housing in general requires greater floor-space per unit than mainstream housing and may also require specialist features, which makes such housing more expensive to build[21]. To ensure the viability of such developments, reports from outside Cambridgeshire suggest a number of responses when setting CIL tariffs, including: setting charges on a per dwelling basis rather than on a per square metre basis, to enable larger internal floor areas; and considering halving the CIL for specialist housing and waiving it where communal facilities are open to the wider public[22].

At the application stage too, national advice recommends that planners recognise the different viability considerations relating to specialist housing. The HAPPI report recommends that planners in section 106 negotiations balance 'the value of achieving a higher level of affordable/social housing for younger households with the advantages of securing housing for older people for those on a range of incomes'[23]. Again, this supports the argument that robust evidence of need is required, in order to inform an exercise balancing need against viability considerations such as those discussed here.

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[21] NHF, 2011. Breaking the Mould, p40

[22] All Party Parliamentary Group on Housing and Care for Older People, 2012. HAPPI 2: Housing our Ageing Population: Plan for Implementation, p19; and Cambridge Centre for Housing and Planning Research, Three Dragons, Land Use Consultants and Heriot Watt University, 2012. The role of the planning system in delivering housing choices for older Londoners, p27

[23] All Party Parliamentary Group on Housing and Care for Older People, 2009. HAPPI: Housing our Ageing Population: Panel for Innovation, p52

HOUSING STANDARDS REVIEW

SOURCE

Requirements for certain proportions of new homes to be accessible and or adaptable to meet differing needs have up until now most frequently been set via reference to Lifetime Homes standards[24]. The Housing Standards Review, which took place between 2012 and 2015, proposed to rationalise a variety of housing standards including Lifetime Homes, incorporating them into revised Building Regulations. The Review was completed in March 2015 with Royal Assent of the Deregulation Bill, additions to the Planning Practice Guidance and new 2015 versions of Approved Building Regulations documents. These changes were accompanied by a ministerial statement of policy.

SUMMARY OF CONTENT

The government's revisions to Building Regulations, requirements for setting access standards under the new regime, and transitional arrangements and proposed policy intent in relation to access standards, are summarised below.

PROPOSALS FOR ACCESS STANDARDS INCLUDED IN APPROVED DOCUMENT M: VOLUME 1 - ACCESS TO AND USE OF DWELLINGS

Category 1 - visitable dwellings

This retains the previous Building Regulations Part M in a format compatible with the optional requirements created as a part of the Housing Standards Review. The Mandatory requirement for dwellings in the revised Approved Document M is Requirement M4(1) – Category 1 visitable dwellings.

Category 2 - Accessible and Adaptable dwellings

Optional requirement referred to as 'Category 2 Accessible and Adaptable dwellings' provides higher levels of accessibility and adaptability than Category 1 dwellings. The requirements are similar to previous requirements for the Lifetime Home Standards.

Category 3 - wheelchair user dwellings

Category 3 dwellings are intended to be capable of meeting or being adapted to meet the needs of a wide range of household members including most wheelchair users.

REQUIREMENTS FOR OPTIONAL LOCAL ACCESS STANDARDS, SET OUT IN A NEW PLANNING PRACTICE GUIDANCE SECTION

- Where a local authority adopts a policy to provide enhanced accessibility or adaptability they should do so only by reference to the optional requirements in the Building Regulations, and clearly state in their Local Plan the proportion of new development which needs to comply with the requirements for category 2 – accessible and adaptable dwellings, or category 3 - wheelchair adaptable or accessible dwellings**[25]**.
- Local Planning Authorities should consider the impact of using these standards as part of their Local Plan viability assessment[26];
- Local Planning Authorities will need to gather evidence to determine whether there is a need for additional standards in their area, and justify setting appropriate policies in their Local Plans[27];

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[24] Lifetime Homes standards (www.lifetimehomes.org.uk) are a set of housing 16 design criteria developed in the 1990s by a group of housing experts, which have been widely used nationally by local planning Authorities.

[25] Planning Practice Guidance, Paragraph: 005 Reference ID: 56-008-20150327

[26] Planning Practice Guidance, Paragraph: 005 Reference ID: 56-003-20150327

- 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. There is a wide range of published official statistics and factors which Local Planning Authorities can consider and take into account, including:
    o the likely future need for housing for older and disabled people (including wheelchair user dwellings);
    o the size, location, type and quality of dwellings needed to meet specifically evidenced needs (for example retirement homes, sheltered homes or care homes);
    o the accessibility and adaptability of existing housing stock;
    o how needs vary across different housing tenures;
    o the overall impact on viability.
- 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[28].

TRANSITIONAL ARRANGEMENTS SET OUT IN THE MINISTERIAL STATEMENT[29]

As noted above, the new Regulations and Approved Building Regulations Documents will come into force in October 2015. From the date of the ministerial statement in March 2015:

- only standards set out in the Building Regulations optional requirements, the associated Approved Documents and the nationally described space standard should be applied in planning conditions for new housing development;
- Local Planning Authorities and qualifying bodies preparing plans should not set in their emerging Local Plans, neighbourhood plans, or supplementary planning documents, any additional local technical standards or requirements relating to the construction, internal layout or performance of new dwellings;
- a Building Regulations optional requirement or nationally described space standard should only be required locally if it addresses a clear need and where the impact on viability and housing supply has been considered;
- Local Planning Authorities should consider their existing plan policies on housing standards and update them as appropriate, for example through a partial Local Plan review. Where policies relating to technical standards have yet to be revised, Local Planning Authorities are advised to set out clearly how the existing policies will be applied in decision taking in light of the statement;
- Local Planning Authorities may also need to review their local information requirements to ensure that technical detail that is no longer necessary is not requested to support planning applications;
- From 1 October 2015, existing Local Plan, neighbourhood plan, and supplementary planning document policies relating to water efficiency, access and internal space should be interpreted by reference to the nearest equivalent new national technical standard. Decision takers should only require compliance with the new national technical standards where there is a relevant current Local Plan policy.

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[27] Planning Practice Guidance, Paragraph: 005 Reference ID: 56-002-20150327
[28] Planning Practice Guidance, Paragraph: 005 Reference ID: 56-007-20150327
[29] Pickles, E. 2015. Written Ministerial Statement to Parliament – Planning Update March 2015: https://www.gov.uk/government/speeches/planning-update-march-2015

ANALYSIS

Analysis of the national policy changes explored above on accessible and adaptable homes highlights the following issues:

- As seen in the broader analysis of the NPPF and PPG above, the new PPG section covering the optional standards emphasises testing viability when local authorities consider policies to provide enhanced accessibility or adaptability;
- The text included in the ministerial statement saying that an optional policy to provide enhanced accessibility or adaptability may "only be required locally if it addresses a clear need and where the impact on viability and housing supply has been considered", as well as the PPG requirements, shows that optional access standards policies will need to be strongly justified. In particular, the requirement in the PPG that the optional requirement should "clearly state…the proportion of new development which needs to comply with the requirements" means that an authority cannot identify a general need for accessible/adaptable housing - it must justify the exact proportion required;
- The PPG paragraph setting out factors for assessing the need for optional accessibility standards, and a summary datasheet, could provide helpful pointers for creating a robust methodology to justify local policies;
- The ministerial statement says that "policies in Local Plans relating to water efficiency, access and space should be interpreted by reference to the nearest equivalent optional requirement or nationally described space standard", and that "where policies relating to technical standards have yet to be revised, Local Planning Authorities are advised to set out clearly how the existing policies will be applied in decision taking in light of the statement". This suggests that local authorities may not have to revise their existing Lifetime Homes housing accessibility requirements, but that these can be interpreted by reference to the nearest new housing access standards. However, even if authorities decide not to adopt the proposed optional access standards, given the PPG's focus on strongly evidencing these standards, there may be a need to ensure that existing accessible housing policies are more strongly supported by evidence.

RECOMMENDATIONS/AREAS FOR FURTHER STUDY

- Individually, Cambridgeshire LPAs may wish to consider whether there is a need to update existing Local Plan accessible housing policies to meet the new Regulations and Guidance.
- If the above goal is agreed to be a priority, it would seem sensible for the LPAs to work together to create a robust HMA-wide methodology for demonstrating the need for Requirement M4(2) (accessible and adaptable dwellings), and / or M4(3) (wheelchair user dwellings). The logical place for the outputs of this work to sit would be within the updated SHMA (see below). This focused work area fits with the broader recommendation above to develop a stronger HMA-wide evidence base for social care housing needs.
- In addition, it will be important to discuss how to incorporate, or apply later, an assessment of viability to the assessment of need for optional housing accessibility standards.
- To assist the viability of specialist housing to meet identified needs, LPAs may wish to consider how they can address the particular viability considerations of such development, both when setting CIL tariffs, and in section 106 negotiations.
- In the short term, it may be beneficial for individual LPAs (or even a number of LPAs working together) to produce a consistent policy statement for how they will interpret existing accessible housing policies, ahead of any updating of policies.

- If there was sufficient agreement, it might be time and resource efficient for the LPAs to work together on some or all of the above actions, with the goal of producing consistently prepared policies across Cambridgeshire (or the Cambridge sub-region HMA).

WHAT DOES LOCAL EVIDENCE SAY IN RELATION TO THESE NATIONAL PLANNING POLICY REQUIREMENTS?

CAMBRIDGE SUB-REGION STRATEGIC HOUSING MARKET ASSESSMENT

As noted above, the NPPF and PPG identify the SHMA as the primary evidence source for housing need. Given its importance, the role of the Cambridge sub-region SHMA in identifying the needs of specific groups is discussed below.

SOURCE

The Cambridge Strategic Housing Market Assessment (SHMA) 2013 covers the Cambridge sub-region Housing Market Area, which includes Cambridgeshire and the two West Suffolk districts: Forest Heath and St Edmundsbury.

Chapter 15 of the SHMA: *Specific housing issues* includes evidence relating to the housing needs of specific groups including children and young people, older people, those with physical and sensory impairment, adults with learning disabilities, different ethnic groups, migrant workers and gypsies and travellers. For the purpose of this social care study only those sections relating to children and young people, older people, those with physical and sensory impairment and adults with learning disabilities are discussed.

SUMMARY OF CONTENT

The SHMA chapter includes primary evidence such as
- Cambridgeshire County Council Research Group demographic forecasts,
- Cambridgeshire County Council Adult Social Care Services' evidence regarding existing service and extra care housing/care home provision,
- Census data on numbers of older people and adults with a disability.

It also includes content from a number of other documents including:
- Joint Strategic Needs Assessments on the topics of Older People and Adults with Learning Disabilities,
- Commissioning Strategy for Extra Care Sheltered Housing in Cambridgeshire 2011-15,
- "Breaking the Cycle" - a strategy for tackling child and family poverty and economic disadvantage in Cambridgeshire, 2011 – 2014, produced by Cambridgeshire Children's Trust,
- Older Gypsies & Travellers Reports.

In broad terms, the primary and secondary evidence sources identified above are used in the SHMA chapter to present:
- Current numbers of people in the relevant social groups,
- Forecast numbers of people/proportions of the population in the relevant social groups,
- Broad housing and service-delivery challenges facing each of the relevant social groups,

- Broad housing and service-delivery priorities for tackling the current and future challenges facing each of the relevant social groups.

ANALYSIS

OVERARCHING ISSUES
The primary outputs of Chapter 15 are to identify current and future demographic trends and proportions of people in the relevant social groups. In terms of linking demographic trends to housing needs, the chapter references various strategies and reports which set out broad challenges and service-delivery priorities.

Quantitative housing needs are not set out here. This perhaps reflects the difficulty of achieving this, as well as the national guidance to which the chapter responded - an issue discussed in detail below.

One aspect of the evidence provided in Chapter 15 that could prove particularly helpful to identifying the housing needs of particular groups are a set of maps taken from the JSNA: Older People including Dementia. These maps show existing provision of sheltered housing schemes, existing and planned extra care schemes, and residential homes, mapped against a number of socio-economic factors.

SHMA GUIDANCE 2007 AND 2014
The SHMA Chapter 15 was written before the publication of new Planning Practice Guidance in March 2014 (and the update to the Housing and Economic Development Needs Assessment section in March 2015). As section 15.4.4 of Chapter 15 sets out, the chapter's content responds to the previous guidance: Strategic Housing Market Assessments: Practice Guidance 2007, Chapter 6: Housing requirements of specific household groups[30].

The 2007 guidance sets out reasons why it is important to consider the housing needs of particular social groups. It also provides freedom as to what content should be included, relative to other chapters in the SHMA guidance: 'Unlike previous chapters, this chapter does not set out a step by step approach since partnerships will need to select the analyses most suited to their research questions'.[31] The Older People's section within Chapter 6 discusses the importance of identifying housing for older people, before identifying sources and methods for estimating future numbers of people with age-related needs. The section goes on to flag up a National Strategy for Housing in an Ageing Society, which was yet to be published when the 2007 SHMA guidance was written. Core Output 8 (the headline required output from that section of the SHMA) is to identify 'estimates of groups who have particular housing requirements',[32] referencing the various social groups discussed in the SHMA. This relatively broad Core Output can be compared to the more detailed Core Output 2, which relates to the current housing market: 'An analysis of past and current housing market trends, including the balance between supply and demand in different housing sectors and prices/affordability:'Description of the key drivers underpinning the housing market.'[33]

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[30] https://www.gov.uk/government/publications/strategic-housing-market-assessments-practice-guidance

[31] Cambridge sub-region SHMA, 15.4.4, quoting sections from CLG, 2007, Strategic housing market assessments: practice guidance, chapter 6

[32] CLG, 2007, Strategic housing market assessments: practice guidance, p57
https://www.gov.uk/government/publications/strategic-housing-market-assessments-practice-guidance

[33] Ibid., p18

Taken together, the lack of prescription over what content should be included in chapter 6; the identification of sources and methods for identifying older people's demographic trends but not housing needs and the flagging of future work to identify solutions to older people's housing issues; and the difference in the level of detail contained in the Core Outputs requirements between chapters 2 and 6 are noteworthy. These features represent a requirement to identify demographic trends in particular social groups, but do not form a clear requirement to identify current and future housing needs for these groups.

To compare the 2007 guidance with current national policy, as noted above, the NPPF states that the SHMA should:
'identify the scale and mix of housing and the range of tenures that the local population is likely to need over the plan period which…addresses the need for all types of housing, including affordable housing and the needs of different groups in the community (such as, but not limited to, families with children, older people, people with disabilities…)'[34]

These statements could be read as a more or less specific requirement to identify the scale and mix of housing required by the identified 'different groups in society'. The PPG is more specific, in particular about identifying the housing needs of older people: while including fewer words on this topic than the previous 2007 SHMA guidance, the PPG identifies specific required outputs, including :

- 'Plan makers will need to consider the size, location and quality of dwellings needed in the future for older people in order to allow them to live independently and safely in their own home for as long as possible, or to move to more suitable accommodation if they so wish.
- The future need for older persons housing broken down by tenure and type (e.g. sheltered, enhanced sheltered, extra care, registered care) should be assessed and can be obtained from a number of online tool kits provided by the sector.
- The assessment should set out the level of need for residential institutions (Use Class C2).
- Many older people may not want or need specialist accommodation or care and may wish to stay or move to general housing that is already suitable, such as bungalows, or homes which can be adapted to meet a change in their needs. Local authorities should therefore identify particular types of general housing as part of their assessment[35].

Taken together, the NPPF and PPG suggest a shift between the 2007 and the post-2014 national policy requirements for identifying the needs of people in different social groups, and in particular older people:

- The 2007 guidance included the broad requirement to identify estimates of groups who have particular housing needs, while
- The NPPF and PPG together include specific requirements to identify the future need for older people's housing, broken down by tenure and type, and to identify particular types of general housing that can meet the needs of older people.

EXISTING ADVICE AND BEST PRACTICE: METHODOLOGIES FOR IDENTIFYING SPECIALIST HOUSING NEEDS

A number of reports and resources have been produced nationally, to support organisations in forecasting future specialist housing needs. A significant point made in some of these sources is that assessments of future specialist housing demand need to be relatively sophisticated in order to provide an appropriate range of housing, in particular for

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[34] CLG, 2012. National Planning Policy Framework, paragraph 159
[35] CLG, 2014. Planning Practice Guidance, Paragraph: 021 Reference ID: 2a-021-20150326

older people. Such methodologies need to reflect the variety of housing options available for older people (adaptations, downsizing, care homes, etc.), and therefore the differing decisions older people make about their housing. Rather than, for example, being wholly based upon prevalence of frailty within the population, evidence approaches need to understand "how factors such as lifestyle, income, biography and culture influence people's decisions."[36]

A number of methodologies for assessing the housing needs of older people already exist, the most sophisticated and helpful being set out in Housing for Later Life – planning ahead for specialist housing for older people[37], and the related Housing LIN SHOP@ tool[38]. The approach set out in this report and the SHOP@ tool reflect this need for a sophisticated approach, integrating factors such as relative wealth and existing supply. Such an approach could prove a helpful model to follow for assessing older people's needs, although this would need to be tested by applying the approach to a local area. It may also be helpful to consider whether a similar approach could be applied to assessing the specialist housing needs for other groups requiring social care.

Having an agreed methodology across a wide area for assessing future housing and support needs would ensure that appropriate housing was provided that met needs[39]. It would also have the added benefits of saving individual local authorities time and costs in creating separate methodologies, and would create certainty for developers. As expectations for a nationally supported methodology may be unrealistic, it seems a good principle that as many parties as possible share the staff resource (or the costs of commissioning a consultant) to develop such a methodology. This would also ensure that the approach met the aims of a range of parties, and had their support[40]. Those with a common interest in producing an agreed methodology go beyond local planning, housing and social care providing authorities, to include organisations such as the NHS, specialist care home developers, and Registered Social Landlords (RSLs). In terms of geography, work has already been started to develop methodologies for forecasting the housing needs of older people at a Cambridgeshire level, and for other specialist housing at a Cambridge HMA level, through the SHMA. If these methodologies can be shown to be robust at a county/HMA level, there may be further benefits in promoting the methodology to partners across a wider area. If organisations across a wider area adopted such an approach it might give it further credibility as a standardised methodology.

On a similar theme to working with partners from different sectors to agree a methodology for forecasting specialist housing needs, reports from national interest groups recommend that evidence and strategies need to be presented and worded in ways that clearly highlight the spatial interventions required[41]. This could include producing evidence in map form, such as the maps in the JSNA: Older People including Dementia mentioned above. There may also be benefits in producing evidence in an Open Data format[42], enabling

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[36] Edwards, M., Harding, E., 2006. Building our Futures: Meeting the housing needs of an ageing population, p10

[37] National Housing Federation, Housing Learning & Improvement Network et al., 2012. Housing for Later Life – planning ahead for specialist housing for older people
http://www.housinglin.org.uk/_library/Resources/Housing/Support_materials/Toolkit/Housing_in_Later_Life_Toolkit.pdf

[38] http://www.housinglin.org.uk/Topics/browse/HousingExtraCare/ExtraCareStrategy/SHOP/SHOPAT/Dashboard/

[39] National Housing Federation, 2011. Breaking the Mould, p39

[40] Local Government Association, 2010. Good homes in which to grow old?, p17

[41] Reuniting Health With Planning - Planning Healthier Places November 2014

[42] Open data is data that is published in an open accessible format, is machine readable and is published under a licence that allows for free re-use. In practice, this means that: data is easy to find (data can be

partners from different sectors to access and interrogate the information, and to easily map it against other data sources.

In addition to the Housing for Later Life report and the Government's summary data sheet mentioned above, there are a number of other resources available to support an assessment of future housing needs for older people and those with specialist needs. A list of relevant data resources is included at Appendix 6.

RECOMMENDATIONS/AREAS FOR FURTHER STUDY

- The change in national guidance discussed above shows that future versions of the SHMA will need to address the NPPF and PPG's specific requirement to move beyond identifying demographic trends to identifying detailed housing needs for older people and those in specific social groups.
- Partners involved in developing methodologies for identifying detailed housing needs for older people may wish to consider ensuring that such methodologies are sophisticated enough to reflect the range of housing choices open to older people, integrating factors such as income and lifestyle.
- Partners involved in developing methodologies for identifying detailed housing needs for older people, and those with specialist needs, may wish to consider involving relevant partner organisations such as the NHS, to ensure that the approaches meet the goals of a such partners, and so that the methodologies have broad support.
- If a methodology can be agreed and shown to be robust at a county/HMA level, there may be further benefits in promoting the methodology to partners across a wider area.
- Using GIS to map existing provision against current and future needs, as seen previously in the maps of existing provision contained within the JSNA: Older People and Dementia, could provide valuable evidence that could help address the PPG's requirements noted above, in particular the location of need for housing of different types. In addition, producing this and other relevant datasets as open data may assist further analysis of need and supply. The review of the SHMA mentioned above provides an opportunity to consider this issue further.

WHAT DO LOCAL PLANNING POLICIES SAY IN RELATION TO THE DESIRED BUILT ENVIRONMENT REQUIREMENTS AND NATIONAL PLANNING POLICY REQUIREMENTS?

SUMMARY OF CONTENT

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searched for on a single site); different datasets can be easily brought together (data is all in the same format); and data can be interrogated, manipulated and re-used (raw data rather than a pdf report, for example). Bringing together different datasets from across departments, sectors and organisations can support plan-making, as well as supporting innovation and efficiencies in other sectors. In this case, producing evidence in an open data format could enable partners across a range of sectors to access and interrogate the information. See www.opendata.cambridgeshireinsight.org.uk/ for more information.

An analysis of adopted and emerging Cambridgeshire Local Plan[43] content is provided below, in terms of how they respond to the social care s106 requirements identified above. This is followed by a more detailed assessment of accessible homes and health impact assessment policies. A full table mapping Local Plan policies against social care requirements is provided at Appendix 7.

1. URBAN DESIGN

Each of the Cambridgeshire Local Plans lists a wide range of urban design principles and requirements. In addition to these principles, each Plan refers to the need for detailed master-plans for large sites, which could be expected to set out urban design requirements in more detail.

The table below broadly maps these policy requirements against some of the NPPF and PPG principles and requirements identified above. A full version of this table, including policy references, is provided at Appendix 7.

NPPF urban design Principle	Related PPG urban design requirement*	Policy requirement included in Cambridgeshire Local Plans
Planning should promote active travel and use of public transport	Urban design should be accessible and understandable to all, and should enable efficient travel.	Require provision of high quality public (or community) transport
		Promote active travel (cycling and walking)
		Develop convenient networks of cycling and walking routes/ Protect and enhance Rights of Way
		Prioritise pedestrians and cyclists over cars/don't allow cars to dominate the street
Create accessible developments that promote active use of public areas	Development proposals should promote accessibility and safe local routes by making places that connect appropriately with each other and are easy to move through Inclusive design, considering those with extra needs such as disabled people and older people, should be considered at every stage of the development process, including the early design stage.	Ensure structure/legibility and permeability of walking routes
		Provide accessibility for those with mobility issues/inclusive design, meeting the needs of all
Create safe and accessible environments	Designing out crime and designing in community safety should be central to the planning and delivery of new development.	Design to reduce the threat of crime and improve community safety/ensure that buildings are orientated to provide natural surveillance
Plan for multifunctional green open space	Open space should be taken account of in planning, given the multiple benefits it provides including health. LPAs should assess needs and plan for open space, across administrative boundaries if necessary.	Protect open space
		Promote the provision of new open space, referring to a district open space strategy and local or national standards
	Sufficient green infrastructure should	Protect, enhance and link up Green

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[43] The sources used are Cambridge Submission Local Plan 2014, East Cambridgeshire Local Plan 2015, Fenland Local Plan 2014, Huntingdonshire Stage 4 draft Local Plan: Huntingdonshire's Local Plan to 2036: Targeted Consultation 2015, and South Cambridgeshire Local Plan Proposed Submission July 2013.

NPPF urban design Principle	Related PPG urban design requirement*	Policy requirement included in Cambridgeshire Local Plans
	be designed into a development to make the proposal sustainable	Infrastructure, supporting the aims of the Green Infrastructure Strategy

2. ACCESSIBLE DWELLING DESIGN

The Local Plans have differing policy requirements relating to accessible housing. Cambridge and Fenland's policies require that 100% of new housing development of all tenures should conform to Lifetime Homes standards, while South Cambridgeshire's policy requires 5% of new private housing and 100% of affordable housing to conform. East Cambridgeshire's policy requires that "a proportion" of housing should conform to Lifetime Homes standards, with a threshold of 50 houses for private developments and a threshold of 5 for affordable housing developments. Fenland's policy adds the caveat that this policy should be applied "where appropriate and viable". Cambridge, Fenland and South Cambridgeshire policies refer only to Lifetime Homes standards, while East Cambridgeshire's policy refers to "Lifetime Homes or equivalent".

Huntingdonshire's draft Local Plan stage 4 was written later than the other emerging or adopted Cambridgeshire Local Plans. Because of this, the proposed policies on accessible dwelling design incorporate more fully the proposed changes to national Regulations and Guidance discussed above. Huntingdonshire's draft policy requires that proposals incorporating housing include "a proportion of homes that comply with the building regulations optional accessibility standards", referring to the new standards instead of Lifetime Homes standards. Given that this policy was drafted before the outcome of the Standards Review was complete, the draft Plan includes a caveat that the policy may be subject to minor modification following the completion of the Review.

Only Cambridge and South Cambridgeshire's policies refer to Wheelchair Homes standards. Cambridge's policy requires that 5% of new homes on sites of 20 or more houses conform to this standard; South Cambridgeshire's policy only requires that housing conforms to such standards within affordable housing developments where specific needs are identified. See the table below for more detail.

3. ADDRESSING HOUSING NEEDS

In terms of allocations for care homes for older people, Fenland Local Plan has a broad policy requiring urban extensions to cater for people with special housing needs. Huntingdonshire draft Local Plan states that the Strategic Expansion Locations and Spatial Planning Areas will accommodate care homes for older people with a specified number of beds. It also makes specific allocations for residential care homes.

Cambridge, East Cambridgeshire and Huntingdonshire have policies supporting specialist accommodation. South Cambridgeshire's submission Local Plan only refers to specialist accommodation to say that this form of housing will not be subject to housing mix requirements.

In terms of specialist housing of other kinds, Huntingdonshire Draft Local Plan identifies a requirement for supported housing at Alconbury Weald, makes allocations for extra-care housing units (class 'C3'), and includes a development management policy supporting this type of accommodation. No other Local Plan specifically refers to these types of specialist housing.

4. COMMUNITY FACILITIES

In relation to community facilities that support a variety of different needs, all the Local Plans have development management policies protecting against the loss of existing community facilities. Cambridge, East Cambridgeshire and Huntingdonshire have policies supporting applications for new community facilities. East Cambridgeshire Local Plan explicitly supports new or enhanced community facilities where opportunities to maximise shared use have been explored. Understandably, given their district-wide strategic nature, the Local Plans do not set detailed requirements for the features of new community facilities.

7. IMPACT ASSESSMENTS

In relation to Health Impact Assessments (HIA), Fenland, Huntingdonshire and South Cambridgeshire have policies requiring them. Fenland and South Cambridgeshire's policies require a different level of detail in the HIA depending on the scale of development, with South Cambridgeshire's being very explicit about this (rapid HIA for developments of 20+ dwellings; full HIA for 100+ dwellings) and Fenland's being more flexible (the HIA should be commensurate with the size of the scheme). Huntingdonshire's draft policy requires HIA only for developments of 200 dwellings+. See the table below for more detail.

ADOPTED/EMERGING LOCAL PLAN LIFETIME HOMES/WHEELCHAIR HOMES CURRENT POLICIES

		Cambridge	East Cambridgeshire	Fenland	Huntingdonshire	South Cambridgeshire
Lifetime homes	Requirement	"Lifetime homes"	"Lifetime homes or equivalent"	"Lifetime homes"	"building regulations optional accessibility standards"	"Lifetime homes standards"
	Proportion of all homes	100%	"a proportion"	100%	"a proportion"	5%
	Threshold	1	50	1	1	1
	Proportion of affordable homes	As above	"a proportion"	As above	As above	100%
	Threshold	As above	5	As above	As above	1
	Caveats	-	-	"Where appropriate and viable"	-	-
Wheelchair housing	Requirement	"Wheelchair homes, or be easily adapted to meet Wheelchair homes design standards"	-	-	-	"Wheelchair homes"
	Proportion	5%	-	-	-	?
	Threshold	20	-	-	-	?
	Caveats	-	-	-	-	only as part of affordable housing, only in response to identified need

		Fenland - LP2 – Facilitating Health and Wellbeing of Fenland Residents	Huntingdonshire LP 10 Health and Wellbeing	South Cambridgeshire - SC/2: Health Impact Assessment
Health Impact Assessment	Threshold	Major developments	For residential: 200 dwellings/4 hectares+; For non-residential: 10,000m2/2 hectares+	1) 20+ dwellings/1,000m2+ floorspace 2) 100+ dwellings/5,000m2+ floorspace
	Scaling	The HIA should be commensurate with the size of the scheme.	None	1) Extended screening or rapid Health Impact Assessment required 2) Full Health Impact Assessment required

ANALYSIS

Analysis of emerging and adopted Local Plan policies relating to social care built environment requirements highlights the following points:

- The urban design policies included in the Local Plans broadly meet the urban design principles and requirements set out in the NPPF and PPG. It may therefore be that social care needs are fully addressed by these Local Plan requirements, and/or that more detailed social care urban design requirements relate more to master-planning.

- While all Local Plans include a policy regarding adaptable/accessible housing, these policies vary greatly. Given the Housing Standards Review discussed above, these policies may need to be reviewed, including the evidence supporting them.

- Most of the Local Plan policies relating to residential care facilities are reactive, in that they state that they will respond to identified needs. Huntingdonshire's draft Local Plan is more proactive, identifying requirements for residential care homes for older people of specific sizes within strategic expansion locations, and allocating specific sites for this kind of accommodation. This raises the question of whether the reactive policies in most of the plans on their own are sufficient to meet current and future needs, or whether the policies, supported by evidence, could better deliver social care challenges by identifying broad geographical areas of need, or even by allocating sites, as done in the Huntingdonshire Plan. This approach raises the question of how the needs were evidenced, and whether such an approach could be adopted by other LPAs.

- On a related note, most of the Local Plans only refer in general terms to "specialist housing", apart from the Huntingdonshire draft Plan which includes both allocations and development management policies relating to supported housing. This raises the question of whether specialist housing needs could be addressed more successfully if plan policies across Cambridgeshire included specific policies supporting various types of specialist housing, following Huntingdonshire's approach. As with policies for care homes, it would be important to robustly evidence such policies.

- Only three of the Local Plans include policies requiring Health Impact Assessments on developments of a certain size. This raises the question of whether it is important for addressing social care goals that all Local Plans require this type of assessment.

- On an overarching note, the analysis above highlights that different approaches are being taken by the different planning authorities across the county. This raises the question of whether greater consistency between Local Plan policies across the districts could better address social care built environment goals, and if so, how this might be achieved.

Research, advice and policy examples from outside Cambridgeshire add further context to the analysis above, focusing on three themes: allocating accessible sites for housing for older people; providing sufficient housing choice for older people; and specialist housing classification and monitoring.

ALLOCATING ACCESSIBLE SITES FOR HOUSING FOR OLDER PEOPLE

Research shows that the majority of older people wish to live in housing that meets their needs in a convenient location within the wider community, as opposed to in a development designed exclusively for older people. It is therefore important, where possible, to plan housing for older people that is 'integrated into mixed age communities'[44]. A policy example of this can be seen in the North Tyneside Local Plan Consultation Draft 2015, which states 'the Council will support proposals for extra care and specialist housing where the development…is integrated into the local residential community'[45].

The above point, when considered together with the need to locate housing for older people in locations that enable easy access to facilities and services, means that such housing would ideally be built in central locations, which are likely to be in high value areas. In order to protect potential sites from competing uses it may be worthwhile for local authorities to specifically allocate land for older people's accommodation[46].

To support the identification and allocation of appropriate sites for specialist housing, the Housing in Later Life report recommends that planning authorities use the SHLAA to assess how appropriate sites are for such housing. When a need for specialist housing is identified, these site assessments can help inform Local Plan allocations[47].

PROVIDING SUFFICIENT HOUSING CHOICE FOR OLDER PEOPLE

One study emphasises that assessments of housing needs and policies to meet those needs must reflect the fact that older people have a choice about where they live. If organisations wish to encourage older people to downsize, therefore freeing up larger family housing, they must consider how they can provide 'a choice of attractive alternative accommodation to move into'[48]. This relates to the issue discussed above of developing sophisticated approaches to identifying specialist housing needs, but also raises the question of how Local Planning Authorities can encourage the provision of a range of models of housing for older people through planning policies. To evidence this point, a consultee to the North Tyneside Local Plan Consultation Draft 2015 (which could be seen to be a forward thinking Local Plan in a) including a specific specialist housing policy, and b) seeking to integrate such housing into existing communities) comments regarding this draft policy that the draft plan could be doing much more to promote 'a greater variety of choice of new housing for older people'[49].

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[44] Joseph Rowntree Foundation, 2002, referenced in Edwards, M., Harding, E., 2006. Building our Futures: Meeting the housing needs of an ageing population, p19

[45] North Tyneside Local Plan Consultation Draft 2015, policy DM7.12 Extra Care / Specialist Housing

[46] NHF, 2011. Breaking the Mould, p40; and also Edwards, M., Harding, E., 2006. Building our Futures: Meeting the housing needs of an ageing population, p40

[47] National Housing Federation, Housing Learning & Improvement Network et al., 2012. Housing for Later Life – planning ahead for specialist housing for older people, p2

[48] Cambridge Centre for Housing and Planning Research, Three Dragons, Land Use Consultants and Heriot Watt University, 2012. The role of the planning system in delivering housing choices for older Londoners, p43

[49] North Tyneside Local Plan Consultation Draft 2015, policy DM7.12. Comment: http://northtyneside-consult.limehouse.co.uk/portal/lp_draft_15?pointId=1392895878377#section-1392895878377

SPECIALIST HOUSING CLASSIFICATION AND MONITORING

Given the increasing range of housing provision for older people, a number of the reports considered identify a lack of clarity nationally over how to classify housing for older people, in terms of the line between a residential care home (classed as C2 Use Class) and independent housing units (C3). This has development viability implications in that care homes (as institutional development) are eligible for VAT but independent units (as residential development) are exempt; conversely, independent units are eligible for s106 contributions including a requirement to provide a proportion of affordable housing on a development, while care homes are less liable for such contributions. Organisations such as the National Housing Federation state that national clarity on this issue would 'significantly improve developer understanding and lender appetite'[50] (further detail on this issue is set out in an online briefing note by the Housing Learning & Improvement Network[51]). In the absence of such national clarity, authorities could help this situation locally by setting out a consistent position across the HMA to classifying such housing, perhaps adopting the approach advocated for London[52], or spreading more widely the approach set out in the Huntingdonshire draft Local Plan stage 4[53] which provides clarity on this issue at a district level.

The classification of specialist housing has implications for the monitoring of positive policies for specialist housing. The success of such policies could be supported through the inclusion of specific monitoring indicators within Local Plans[54]. An example of this can be seen in Guildford Borough Council's draft Local Plan 2014 Policy 3 Monitoring Indicators, which includes the indicator to monitor 'planning approval for new or extended older persons' specialist housing (including care homes and warden-assisted accommodation) or general specialist housing'[55].

RECOMMENDATIONS/AREAS FOR FURTHER STUDY

Based upon the analysis above, it may be beneficial for interested partners to:
- Consider the value and practicality of developing more specific and proactive planning policies for residential care and specialist housing, perhaps building upon the approach taken in Huntingdonshire;
- Within the above approach, the Local Planning Authorities may wish to consider:
  - the need to allocate specific sites for older people's housing in central locations;
  - whether future SHLAAs could include assessments of how appropriate sites are for meeting specialist housing needs, in order to inform future site allocations;
  - how plan policies can support provision of a variety of different housing

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[50] NHF, 2011. Breaking the Mould, p40

[51] Housing LIN, 2011. Planning Use Classes and Extra Care Housing. http://www.housinglin.org.uk/_library/Resources/Housing/Support_materials/Viewpoints/Viewpoint_20_Planning_Use_Classes.pdf

[52] This approach advocates that 'all purpose built housing for older people which provides self contained accommodation and their own lockable front door should be classed as C3 units by LPAs. Units without these attributes should be C2 units'. Cambridge Centre for Housing and Planning Research, Three Dragons, Land Use Consultants and Heriot Watt University, 2012. The role of the planning system in delivering housing choices for older Londoners

[53] Huntingdonshire District Council, 2015. Huntingdonshire's Local Plan to 2036: Targeted Consultation 2015, 3.101-3.107

[54] Reuniting Health With Planning – Healthier Homes, Healthier Communities July 2012

[55] Guildford Borough Council, 2014. Draft Local Plan, Policy 3 Monitoring Indicators

models for older people, in order to provide sufficient range of attractive housing options;

- o agreeing a countywide or HMA-wide approach to classifying specialist housing for older people;
- o including specific monitoring indicators for specialist housing within Local Plans;
- Use the Housing Standards Review as an opportunity to review: the benefits of including accessible housing standards in Local Plan policies, the evidence required to support such policies; and the benefits/practicality of developing a more consistent approach to these across the county;
- Discuss the benefits and practicalities of developing more consistent policy approaches across the county that could better address social care challenges.

3. WHAT MORE COULD BE DONE TO DELIVER SOCIAL CARE OUTCOMES THROUGH THE PLANNING SYSTEM?

This section brings together the recommendations for further work identified in the two previous chapters. The recommendations focus upon four of the categories which were used to structure the report: process; urban design; dwelling design; and specialist housing needs. Each group of recommendations is split into recommendations relating to evidence and policy, and identifies lead organisations.

Theme	Evidence /Policy	Recommendation	Lead
Process	Evidence	Work with relevant partners to identify and bring together common social care requirements and evidence, in order to strengthen the justification for these features. Within this work-stream, identify whether more specific social care requirements and evidenced justification is needed to achieve urban design that meets social care needs.	CCC
		• Directly reference supportive national planning policy statements within social care strategies and section 106 requests. In particular, the National Planning Policy Framework (NPPF) and Planning Practice Guidance (PPG)'s strong focus on design provides policy hooks to require specific inclusive neighbourhood design features, if this would help address social care goals.	CCC
	Policy	• Discuss the benefits and practicalities of developing more consistent planning policy approaches across the county that could better address social care challenges.	Local Planning Authorities (LPAs)
Dwelling design/ Specialist housing needs	Evidence	• Work together to ensure that future versions of the Cambridge sub-region Strategic Housing Market Assessment (SHMA) address the NPPF and PPG's specific requirement to move beyond identifying demographic trends to identifying detailed housing needs for older people and those in specific social groups. • Consider ensuring that methodologies for identifying detailed housing needs for older people are sophisticated enough to reflect the range of housing choices open to older people, integrating factors such as income and lifestyle. • When developing methodologies for identifying specialist housing needs, consider involving relevant partner organisations such as the NHS, to ensure that the approaches meet the goals of a such partners, and so that the methodologies have broad support. • If a methodology can be agreed and shown to be robust at a county/HMA level, there may be further benefits in promoting the methodology to partners across a wider area. • Using GIS to map existing provision against current and future needs, as seen previously in the maps of existing provision contained within the JSNA: Older People and Dementia, could provide valuable evidence that could help address the PPG's requirements noted above, in particular the location of need for housing of different types. In addition, producing this and other relevant datasets as open data may assist further analysis of need and supply. The forthcoming review of the SHMA provides an opportunity to consider this issue further.	LPAs and housing authorities

Theme	Evidence /Policy	Recommendation	Lead
		• Work with relevant partners to create a robust HMA-wide methodology for demonstrating the need for Requirement M4(2) (accessible and adaptable dwellings), and / or M4(3) (wheelchair user dwellings), including the required proportion of all homes that should meet these standards. • Discuss how to incorporate, or apply later, an assessment of viability to the assessment of need for optional housing accessibility standards.	
	Policy	• Consider whether there is a need to update existing Local Plan accessible housing policies to meet the new Regulations and Guidance. • To assist the viability of specialist housing to meet identified needs, consider how to address the extraordinary viability considerations of such development, both when setting CIL tariffs, and in section 106 negotiations. • In the short term, it may be beneficial for individual LPAs (or even a number of LPAs working together) to produce a consistent policy statement for how they will interpreting existing accessible housing policies, ahead of any updating of policies. • If there were sufficient agreement, it might be time and resource efficient for the LPAs to work together on some or all of the above actions, with the goal of producing consistently prepared policies across Cambridgeshire (or Cambridge sub-region HMA).	LPAs

	Policy	• Consider the value and practicality of developing more specific and proactive planning policies for residential care and specialist housing, perhaps building upon the approach taken in Huntingdonshire;
		• Within the above approach, the Local Planning Authorities may wish to consider:
		   o the need to allocate specific sites for older people's housing in central locations;
		   o whether future SHLAAs could include assessments of how appropriate sites are for meeting specialist housing needs, in order to inform future site allocations;
		   o how plan policies can support provision of a variety of different housing models for older people, in order to provide sufficient range of attractive housing options;
		   o agreeing a countywide or HMA-wide approach to classifying specialist housing for older people;
		   o including specific monitoring indicators for specialist housing within Local Plans;
		• Use the Housing Standards Review as an opportunity to review: the benefits of including accessible housing standards in Local Plan policies, the evidence required to support such policies; and the benefits/practicality of developing a more consistent approach to these across the county;
			LPAs

Other		• The PPG's reference to impact assessments provides a policy hook to promote inclusion of impact assessment policies, such as health impact assessments (which could include impacts on those with social care needs), within Local Plans.	LPAs

APPENDIX 1: DEFINING ADULT SOCIAL CARE

WHY IS IT IMPORTANT TO DEFINE SOCIAL CARE?

For this report it is important to consciously define social care, in order to focus exploration of issues and therefore identify meaningful conclusions. As discussion below shows, this is particularly important in the context of Social Care, given:

- The strong overlap in priorities between social care, health and housing sectors;
- The linked issue of there being no universally agreed definition of social care; and
- Recent moves nationally and locally to refocus social care definitions, around outcomes rather than services.

DISCUSSION OF THE ISSUES

Key features when defining Adult Social Care include:

- Identifying *whose needs* social care aims to address
- Identifying *what needs* social care aims to address

Pre-existing service-focused definition

The Law Commission definition of Adult Social Care (see below, formatting and sub-headings my own) is a services-focused definition. This identifies service users and also identifies a wide range of services to meet their needs, without identifying what those needs are. This approach attempts to tightly define Adult Social Care as separate to health, formal education, or housing services.

- "What is Adult Social Care? Adult social care means the care and support provided by local social services authorities pursuant to their responsibilities towards adults who need extra support.
- Whose needs does it address? This includes older people, people with learning disabilities, physically disabled people, people with mental health problems, drug and alcohol misusers and carers.
- What do services look like? Adult social care services include the provision by local authorities and others of *traditional services* such as care homes, day centres, equipment and adaptations, meals and home care. It can also extend to a range of so-called *non-traditional services* – such as gym membership, art therapy, life coaching, personal assistants, emotional support, and classes or courses. Adult social care also includes services that are provided to carers – such as help with travel expenses, respite care, and career advice. Finally, Adult Social Care also includes the mechanisms for delivering services, such as assessment, personal budgets and direct payments[56]."

More recent outcomes-focused definition

Recently, attempts have been made to create a unified definition of Adult Social Care that focuses on outcomes instead of services. This aims "to promote or contribute to the well-being of the individual"[57]. Such an approach works on the basis that service–focused definitions, such as the Law Commission definition cited above, create unhelpful separations between services and divert attention from meeting users' needs: "attempts to draw a distinction between these services (e.g. health and housing) and social care will fail

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[56] The Law Commission, 2011. Adult Social Care

[57] Commons Select Committee – Health publication: Social Care – 2 The fragmentation of services and commissioning

because such distinctions are artificial and unhelpful, and because they directly contradict the policy objective"[58]. On the other hand, in a different way to the service-focused definition, the outcomes focused approach still struggles to identify Adult Social Care service users' needs in a meaningful way, doing so only in a very broad sense: "the well-being of the individual". In contrast to the service-focused approach, the deliberate focus on outcomes necessitates integration, rather than separation, of services.

Cambridgeshire County Council definition
Cambridgeshire County Council's Adult Social Care Services' vision is to:

- enable people to live independently
- support people in a way that works for them
- support the development of strong, connected communities
- recognise the strengths of individuals, families and communities and build upon these
- work in partnership to achieve this[59].

The Cambridgeshire vision clearly defines a way of working focused on community development and partnership working with overlaps with housing and health goals.

WHAT ARE THE IMPLICATIONS FOR THIS REPORT?
Cambridgeshire County Council's community-focused, broadly defined Adult Social Care vision has implications for how planning can address Adult Social Care needs in the area:

Needs rather than service-focused
This report should focus on identifying and addressing the physical environment needs of "older people and adults affected by disability (learning disabilities, physical disabilities, sensory impairments, mental health problems and HIV/AIDs)", rather than seeking to address Adult Social Care service needs per se.

A cross-sector approach, delivering cross-sector outcomes
Following on from the first point, successfully delivering planning solutions that address the needs of the groups identified above will require the involvement of stakeholders representing a range of sectors including Adult Social Care, health, housing and planning.

Adopting this cross-sector approach, this report will inevitably involve identifying some built environment outcomes and planning solutions that address the unique specialised needs of Adult Social Care users, and some that address priorities that are shared with other services. In particular, achieving the Adult Social Care vision through physical environment outcomes will:
- Involve facilitating the wider health and wellbeing of those with Adult Social Care needs, as well as addressing specialist Adult Social Care needs;
- Also benefit wider society, given that a health-enabling physical environment will be used by everyone, not just those with specific Adult Social Care needs.

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[58] Ibid.
[59] http://www.cambridgeshire.gov.uk/info/20166/working_together/579/delivering_the_care_act/3

APPENDIX 2: REVIEW OF RELEVANT HEALTH AND SOCIAL CARE LEGISLATION AND POLICY

NATIONAL POLICY

BUDGET 2015

The UK Government's budget sets the context for all public sector spending, constraining the policy responses that local public sector organisations can make. The 2015 budget confirms that as a whole the public sector will face further cuts in central government funding in the near future, with around £30bn of savings needing to be found between 2016-17 and 2017-18[60]. This will have inevitable effects on reducing public sector budgets at a Cambridgeshire level.

CARE ACT 2014

National social care legislation and policy influence local social care policy approaches, which in turn influence social care requirements for the physical environment. The Care Act 2014 sets the shape and approach of the care and support system in England, and marked a significant change from the previous system. While the Act's content focuses mainly upon how local authorities provide social care services as opposed to planning-focused recommendations, its broad themes are instructive in understanding the general direction of social care policy, and are relevant to planning. Relevant themes[61] are discussed below:

- The Act includes a central theme of defining and promoting the **wellbeing** of the individual, which influences all the other main themes in the Act.
- The focus on wellbeing is an outcomes, as opposed to services, -focused approach. Addressing the wide range of factors, including the physical environment, that can influence wellbeing, necessitates **integration with health and related services**. One of the sectors identified in the guidance as a related service that social care should integrate with is planning. The guidance specifically states:

  > To ensure greater integration of services, a local authority should consider the different mechanisms through which it can promote integration, for example:
  > (a) Planning – using adult care, support and public health data to understand the profile of the population and the needs of that population. For example, using information from the local Joint Strategic Needs Assessments to consider the wider need of that population in relation to housing. The needs of older and vulnerable residents should be reflected within local authorities' development plans with reference to local requirements for inclusive mainstream housing and specialist accommodation and/or housing services[62].

- 'Although not mentioned specifically in the way that "wellbeing" is defined, the concept of "independent living" is a core part of the wellbeing principle'[63]. The

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[60] HM Treasury, 2015. UK Budget p26
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/416330/47881_Budget_2015_Web_Accessible.pdf
[61] These themes are set out in Care and Support Statutory Guidance Issued under the Care Act 2014
[62] Ibid, p283
[63] Care and Support Statutory Guidance Issued under the Care Act 2014, para 1.17

philosophy that independent living is a part of wellbeing implies that suitable accommodation is available to enable it, and feeds into the theme in the Act of **preventing, reducing or delaying needs**. Such an approach suggests a need for the physical environment including housing and neighbourhood design to consider wider solutions than just specialist needs.

LOCAL STRATEGIES

CAMBRIDGESHIRE HEALTH & WELLBEING STRATEGY 2012-17

SOURCE

The Cambridgeshire Health and Wellbeing Board and Network brings together leaders from local organisations that have a strong influence on health and wellbeing, including the commissioning of health, social care and public health services. The Health and Wellbeing Board and Network are responsible for the Cambridgeshire Health & Wellbeing Strategy 2012-17, which sets out the priorities they feel are the most important for local people. This Strategy is relevant to this study because it provides some context within which Cambridgeshire County Council social care and public health priorities and policy approaches are set, thereby influencing the County Council's social care built environment priorities.

SUMMARY OF CONTENT

The Cambridgeshire Health & Wellbeing Strategy 2012-17:
- Recognises the 'wider determinants of health' that impact on people's health and well being, which includes the physical environment.
- Identifies the large increase in population forecast to happen over the next five years, including a large increase in the population aged 65+
- Shows that 45% of resources used for NHS hospital care were for people aged 65+, which is to be expected as people are more likely to develop health problems and long term conditions with increased age. Further analysis showed that while resources used for planned hospital admissions were highest for people aged 60-74, resources used for unplanned hospital admissions and for placements in nursing and residential home care were highest for the very oldest age groups. This analysis raises the question of whether the needs of our most elderly and frail residents would be better met by shifting resources into more responsive and integrated health and social care services, based within communities.
- **Priority 2 Support older people to be independent, safe and well,** which states Promote preventative interventions which reduce unnecessary hospital admissions for people with long term conditions, enable them to live independently at home or in a community setting where appropriate and improve their health and wellbeing outcomes.
- **Priority 5 Create a sustainable environment in which communities can flourish,** which states
  - Develop and maintain effective, accessible and affordable transport links and networks, within and between communities, which ensure access to services and amenities and reduce road traffic accidents;
  - Ensure that housing, land use planning and development strategies for new and existing communities consider the health and wellbeing impacts for

residents in the short and long term (including recognising the importance of lifetime homes on large scale housing developments so people are not excluded by design when they become older or frailer);

o Encourage the use of green, open spaces including public rights of way, and activities such as walking and cycling.

CAMBRIDGESHIRE COUNTY COUNCIL BUSINESS PLAN

SOURCE

Cambridgeshire County Council Business Plan 2014-15 sets out the Council's long-term vision, priorities for 2014-15 and planned activities across the organisation for the next five years. This is relevant to a study of delivering social care goals via the planning system, since it sets the context within which Cambridgeshire County Council's social care priorities and requirements are identified.

SUMMARY OF CONTENT

Reflecting the national picture, the Business Plan identifies the local challenge of increasing needs and decreasing budgets, stating that the overall population will increase by 22% over the next 20 years, bringing with it additional Adult Social Care needs. In addition, the proportion of people aged 65+ will almost double. At the same time, County Council budget forecasts show a £149m funding gap in 2018/19 if no action is taken.

In addition to this, the Plan identifies a number of goals, relevant to social care and the built environment, which reflect the national aim of supporting people to stay independent and in their own homes later in life. These goals include:

- Ensuring the principle of 'Homes for Life' is embedded in both existing and new communities;
- Working with other organisations to provide information and support within the community (including via the Community Navigators scheme, and by co-locating several community services within 'community hubs');
- Focusing on early identification of needs and early intervention
- Expanding short term support such as re-ablement and crisis management to provide intensive help that supports people to return to independence rather than a reliance on long-term social care.

CAMBRIDGESHIRE COUNTY COUNCIL STRATEGY FOR SUPPORTING NEW COMMUNITIES[64]

SOURCE

The CCC Strategy for Supporting New Communities sets out how Cambridgeshire County Council will support new communities across Cambridgeshire. While the Strategy focuses on people-related support, it is relevant to this project because CCC requirements for new communities will reflect, and are intended to support, the approach set out in the Strategy.

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[64] The Strategy for Supporting New Communities was approved September 2015

As the Strategy for Supporting New Communities states, it reflects the current context whereby CCC needs to "manage demand for services within available resources by focusing less on traditional service delivery and more on equipping and empowering the new community to help itself".[65] In this way the document reflects the broad national and local policy approaches noted above: working in the context of less money available; and helping people to help their selves.

The strategy includes the following sections:

1. Vision
2. Where we are now, setting out current challenges including forecast increases in population and challenges and opportunities associated with new communities.
3. How we will achieve our vision, including a number of principles: community building, partnership working, co-location, and innovation to support the new community.
4. How will we know we are successful?, setting out four outcomes: communities that are safe, resilient and independent, healthy and maximise community potential.
5. Delivering the Strategy, including setting out the intention to set up a number of groups internal to CCC to identify needs and manage the planning of support, plus discussion of timing, monitoring and reporting.

The following features from the Strategy are particularly relevant to the built environment and the planning system:

*   Within the vision, one of the core aims is to ensure that infrastructure in new communities is designed to meet the needs of the community now and in the future.
*   Within section 3 *How we will achieve our vision?,* the section regarding co-location – sharing facilities and improving access wherever possible is relevant to the provision and design of community facilities. Key points raised are that the provision of formal and informal meeting places is recognised as critical, including within the National Planning Policy Framework, but that "community buildings need to be more than meeting spaces and traditional unmanned village halls, they should provide an opportunity for the community to connect with support and services."[66] The document cites the County Council's pre-existing Community Hub Policy for new communities, a policy which sets out guiding principles for the development of such hubs.
*   Within section 4 How will we know we are successful?, a number of features are listed of communities that are safe, resilient and independent, healthy, and maximise community potential. Among these, several relate to the built environment:
    o   Safe and accessible infrastructure;
    o   Low levels of risky behaviour, crime and anti-social behaviour can be influenced by neighbourhood design features such as Secured by Design;
    o   Choice of quality homes required to meet the needs of present and future generations;
    o   Good quality shared space and community facilities;

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[65] Cambridgeshire County Council Children, Families & Adults Directorate, 2015–Strategy For Service Delivery In New Communities, p5
[66] Cambridgeshire County Council Children, Families & Adults Directorate, 2015–Strategy For Service Delivery In New Communities, p19

- o Accessible services;
  - o People are active – as with crime, the neighbourhood environment can enable and promote active lifestyles;
  - o Enough good quality early years, school and post-16 places;
  - o Adults can access quality skills and community learning opportunities – design of the built environment and sustainable transport provision can enable access to services and education and employment.
- Within section 5, Delivering the Strategy, the document discusses need for CCC to provide input to the statutory planning process for planning new communities, working within set planning process timescales.

CAMBRIDGESHIRE COUNTY COUNCIL OPERATING MODEL

Cambridgeshire County Council's forthcoming Operating Model highlights that the authority needs to find £119 million in savings between now and 2020. To meet this challenge Cambridgeshire County Council is using a new operating model for business planning and setting the budget. This targets funding on priority outcomes where we need to focus and encourages services to work across the authority to find solutions.

SUMMARY OF CONTENT

The operating model will be designed to take a longer term approach to planning considering how we need to be delivering services by 2020 with 40% less resource. It will also be designed to help find new approaches to working together within services and between services across the council, as well as with partners, the public and communities to the benefit of the residents of Cambridgeshire.

The new Operating Model will set out the main outcomes that Cambridgeshire County Council wants for people in Cambridgeshire, and asks that they can find ways to work together to meet them:

Older people live well independently –
People with disabilities live well independently –
People at risk of harm are kept safe –
People lead a healthy lifestyle –
Children and young people reach their potential in settings and schools –
The Cambridgeshire economy prospers to the benefit of all Cambridgeshire residents –
People live in a safe environment –

These outcomes are informed by what communities want and the major priorities set for the authority by councillors. This means the work and funding will be prioritised to meet these outcomes.

APPENDIX 3: SUMMARIES OF JUSTIFICATIONS FOR PROPOSED PLANNING RESPONSES

Summary of evidence	Evidence source
Need for good design to support mental health	No Health without Mental Health 2011; Cambridgeshire Health and Wellbeing Strategy 2012-17
Government justification for adaptable housing	CLG, 2009. Government research into the financial benefits of the supporting people programme 2009
Benefits of good quality housing	Ibid.
Statutory justification for adaptable housing / financial benefits of enabling older people to stay in their own homes for longer	Ibid.
Financial benefits of enabling people to live in their own home for longer	Ibid.
Justification for adaptable housing need in Cambridgeshire	New Communities Joint Strategic Needs Assessment. 2010: 11
Justification for the need for extra care housing for older people in Cambridgeshire	Extra Care Sheltered Housing in Cambs Strategy
Justification for community groups in suitable community spaces to build social cohesion among those with additional needs	New Communities Joint Strategic Needs Assessment. 2010; Transferable Lessons from New Towns 2006
Justification for space within community hub/facility for Children's Centre activities in new communities	CCC current practice
Justification for community hub	CCC Community Hub
Statutory requirement for children's centre service provision	Child Care Act 2006
Government support for Children's Centre provision approach	Frank Field's report on Preventing Poor Children becoming Poor Adults,
Evidence of the efficacy of named professional case workers to support domestic abuse victims.	Home Office 2009, 2011 and 2014 • Howarth et al 2009 • NICE 2014 • HMIC 2014 • CAADA 2014.
Justification for locality team staff: estimated number of children and young people requiring support in new community	CFA metrics
Justification for early intervention to build good community cohesion and values	Durkheim, 1972; New Communities JSNA 2010
County Council Transforming Lives model: focus on prevention and early intervention	CCC, 2014. Transforming Lives Strategy
Justification for funding to support community groups and resources	Design for Social Sustainability: A framework for creating thriving new communities 2011

APPENDIX 4: NPPF PRINCIPLES RELEVANT TO SOCIAL CARE GOALS

CCC sub-theme	Text summary	Full text	Section	Para.
0.1 Process	**Plan to meet health and wellbeing goals**	• take account of and support local strategies to improve health, social and cultural wellbeing for all, and deliver sufficient community and cultural facilities and services to meet local needs.	Core Planning Principles	17
0.1 Process	**Work with relevant health partners**	Local Planning Authorities should work with public health leads and health organisations to understand and take account of the health status and needs of the local population (such as for sports, recreation and places of worship), including expected future changes, and any information about relevant barriers to improving health and well-being.	Plan-making: Local Plans	171
1. Urban design	**Seek to secure high quality design**	• always seek to secure high quality design and a good standard of amenity for all existing and future occupants of land and buildings;	Core Planning Principles	17
1. Urban design	**Create safe and accessible environments**	Planning policies and decisions should aim to ensure that developments: • create safe and accessible environments where crime and disorder, and the fear of crime, do not undermine quality of life or community cohesion	Delivering a wide choice of high quality homes	58
1. Urban design	**Places should promote social interaction**	Planning policies and decisions, in turn, should aim to achieve places which promote: • opportunities for meetings between members of the community who might not otherwise come into contact with each other, including through mixed-use developments, strong neighbourhood centres and active street frontages which bring together those who work, live and play in the vicinity;	Promoting Healthy Communities	69
1. Urban design	**Create safe environments**	• safe and accessible environments where crime and disorder, and the fear of crime, do not undermine quality of life or community cohesion;	Promoting Healthy Communities	69
1. Urban design	**Create accessible developments that promote active use of public areas**	• safe and accessible developments, containing clear and legible pedestrian routes, and high quality public space, which encourage the active and continual use of public areas.	Promoting Healthy Communities	69

CCC sub-theme	Text summary	Full text	Section	Para.
1. Urban design	**Planning's social role in supporting health communities**	a social role – supporting strong, vibrant and healthy communities, by providing the supply of housing required to meet the needs of present and future generations; and by creating a high quality built environment, with accessible local services that reflect the community's needs and support its health, social and cultural well-being;	Achieving Sustainable Development	7
1. Urban design	**Planning should promote active travel and use of public transport**	• actively manage patterns of growth to make the fullest possible use of public transport, walking and cycling, and focus significant development in locations which are or can be made sustainable;	Core Planning Principles	17
1. Urban design	**Location of housing and other uses should be integrated**	• ensure an integrated approach to considering the location of housing, economic uses and community facilities and services.	Promoting Healthy Communities	70
2. Dwelling design	**Mix of housing to meet the needs of different groups in the community**	• plan for a mix of housing based on current and future demographic trends, market trends and the needs of different groups in the community (such as, but not limited to, families with children, older people, people with disabilities, service families and people wishing to build their own homes);	Delivering a wide choice of high quality homes	50
2. Dwelling design	**Mix of housing to meet the needs of different groups in the community**	• identify the size, type, tenure and range of housing that is required in particular locations, reflecting local demand;	Delivering a wide choice of high quality homes	50
3. Specialist care needs	**Mix of housing to meet the needs of different groups in the community**	SHMA should address the need for all types of housing, including affordable housing and the needs of different groups in the community (such as, but not limited to, families with children, older people, people with disabilities, service families and people wishing to build their own homes);	Plan-making: Local Plans	159

CCC sub-theme	Text summary	Full text	Section	Para.
4. Community facilities	**Plan to support provision of community facilities**	• plan positively for the provision and use of shared space, community facilities (such as local shops, meeting places, sports venues, cultural buildings, public houses and places of worship) and other local services to enhance the sustainability of communities and residential environments; • guard against the unnecessary loss of valued facilities and services, particularly where this would reduce the community's ability to meet its day-to-day needs; • ensure that established shops, facilities and services are able to develop and modernise in a way that is sustainable, and retained for the benefit of the community	Promoting Healthy Communities	70
4. Community facilities	**Plan to support provision of community facilities**	• the provision of health, security, community and cultural infrastructure and other local facilities	Plan-making: Local Plans	156
4. Community facilities	**Assess quality and capacity of health and social care infrastructure, among other facilities**	Local Planning Authorities should work with other authorities and providers to: • assess the quality and capacity of infrastructure for ...health, social care...	Plan-making: Local Plans	162

APPENDIX 5: PPG REQUIREMENTS RELEVANT TO SOCIAL CARE GOALS

CCC sub-theme	Related NPPF principle	Text summary	Paragraph title	PPG level 1 theme	PPG Level 2 theme	Reference ID
0.1 Process	Work with relevant health partners	**Planners should work with the Director of Public Health, the Health & Wellbeing Board, the local Clinical Commissioning Groups and NHS England, and the local community to support healthy and well communities.**	Who are the main health organisations a local authority should contact and why?	Health and wellbeing	What is the role of health and wellbeing in planning?	Reference ID: 53-003-20140306
1. Urban design	Seek to ensure high quality design that meets the needs of all	**Development proposals should promote accessibility and safe local routes by making places that connect appropriately with each other and are easy to move through.**	Planning should promote safe, connected and efficient streets	Design	What planning objectives can good design help achieve?	Reference ID: 26-008-20140306
1. Urban design	Create safe and accessible environments	**Urban design should be accessible and understandable to all, and should enable efficient travel.**	A well designed space promotes ease of movement	Design	What is a well designed place?	Reference ID: 26-022-20140306
1. Urban design	Create safe and accessible environments	**Designing out crime and designing in community safety should be central to the planning and delivery of new development.**	Planning should address crime prevention	Design	What planning objectives can good design help achieve?	Reference ID: 26-010-20140306
1. Urban design	Seek to ensure high quality design that meets the needs of all	**Urban design should be flexible to respond to changing circumstances and demands.**	A well designed place is adaptable and resilient	Design	What is a well designed place?	Reference ID: 26-019-20140306

CCC sub-theme	Related NPPF principle	Text summary	Paragraph title	PPG level 1 theme	PPG Level 2 theme	Reference ID
1. Urban design	Plan for multifunctional green open space	**LPAs should integrate climate change adaptation and mitigation, looking for win-win approaches such as multi-functional green infrastructure.**	How can adaptation and mitigation approaches be integrated?	Climate change	How can adaptation and mitigation approaches be integrated?	Reference ID: 6-004-20140612
1. Urban design	Plan for multifunctional green open space	**A system of open and green spaces that respect natural features and are easily accessible can be a valuable local resource and helps create successful places.**	Planning should promote a network of greenspaces (including parks) and public places	Design	What planning objectives can good design help achieve?	Reference ID: 26-009-20140306
1. Urban design	Plan for multifunctional green open space	**Sufficient green infrastructure should be designed into a development to make the proposal sustainable.**	Does compensation reduce the need for green infrastructure within a development?	Natural Environment	Biodiversity, ecosystems and green infrastructure	Reference ID: 8-019-20140306
1. Urban design	Plan for multifunctional green open space	**Open space should be taken account of in planning, given the multiple benefits it provides including health. LPAs should assess needs and plan for open space, across administrative boundaries if necessary.**	Open space, sports and recreation facilities	Open space, sports and recreation facilities, public rights of way and local green space	Open space, sports and recreation facilities	Reference ID: 37-001-20140306
1. Urban design	Create safe and accessible environments	**Urban design, including patterns of development promoting active lifestyles, multifunctional greenspace, environments which promote social interaction, are accessible to all and are adaptable for those with extra needs, can enable the**	What is a healthy community?	Health and wellbeing	What is the role of health and wellbeing in planning?	Reference ID: 53-005-20140306

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CCC sub-theme	Related NPPF principle	Text summary	Paragraph title	PPG level 1 theme	PPG Level 2 theme	Reference ID
		development of a healthy community.				
1. Urban design	Create safe and accessible environments	**Good design works for everyone, looks good, lasts well and will adapt to the needs of future generation.**	Why does good design matter?	Design	The importance of good design	Reference ID: 26-001-20140306
1. Urban design	Seek to secure high quality design that meets the needs of all	**Inclusive design, considering those with extra needs such as disabled people and older people, should be considered at every stage of the development process, including the early design stage.**	Planning should promote access and inclusion	Design	What planning objectives can good design help achieve?	Reference ID: 26-012-20140306
1. Urban design	Create safe and accessible environments	**Inclusive design relates to the urban environment, not just to buildings.**	Planning should promote access and inclusion	Design	What planning objectives can good design help achieve?	Reference ID: 26-012-20140306
1. Urban design	Mix of housing to meet the needs of different groups in the community	**Healthy communities are influenced by community cohesion. Developments should aim to promote mixed communities from a range of demographic groups.**	Planning should promote access and inclusion	Design	What planning objectives can good design help achieve?	Reference ID: 26-012-20140306
1. Urban design	Create safe and accessible environments	**A well designed place should be intuitive, comfortable, safe and equally easy for all to use.**	A well designed place is functional	Design	What is a well designed place?	Reference ID: 26-016-20140306

CCC sub-theme	Related NPPF principle	Text summary	Paragraph title	PPG level 1 theme	PPG Level 2 theme	Reference ID
1. Urban design	Create safe and accessible environments	**When considering pedestrians plan for wheelchair users and people with sensory or cognitive impairments. Legible design, which makes it easier for people to work out where they are and where they are going, is especially helpful for disabled people.**	Street design and transport corridors issues	Design	Are there design issues that relate to particular types of development?	Reference ID: 26-042-20140306
1. Urban design	Mix of housing to meet the needs of different groups in the community	**A good mix of uses and tenures is often important to making a place economically and socially successful, ensuring the community has easy access to facilities, reducing the need to travel, and allowing communities and places to respond to changes in the use of buildings and spaces.**	A well designed place supports mixed uses and tenures	Design	What is a well designed place?	Reference ID: 26-017-20140306
1. Urban design	Plan to meet health and wellbeing goals	**To support healthy communities and provide sufficient healthcare infrastructure, plan makers and decision takers should: help create healthy living environments; promote health, social and cultural wellbeing and support the reduction of health inequalities; consider local health and wellbeing strategies; consider healthcare infrastructure implications of new development; make developments that are accessible to all.**	What are the links between health and planning?	Health and wellbeing	What is the role of health and wellbeing in planning?	Reference ID: 53-002-20140306
2. Dwelling design	Mix of housing to meet the needs of different	**Assessments of housing need should consider the future needs of older people, using relevant evidence to identify need broken down by tenure and type, and including the level of need for residential**	How should the needs for all types of housing be addressed?	Housing and economic development needs assessments	Methodology: assessing housing need	Reference ID: 2a-021-20150326

CCC sub-theme	Related NPPF principle	Text summary	Paragraph title	PPG level 1 theme	PPG Level 2 theme	Reference ID
	groups in the community	**institutions.**				
2. Dwelling design	Mix of housing to meet the needs of different groups in the community	**Assessments of housing need should consider the future needs of disabled people, using relevant evidence to identify need.**	How should the needs for all types of housing be addressed?	Housing and economic development needs assessments	Methodology: assessing housing need	Reference ID: 2a-021-20150326
2. Dwelling design	Mix of housing to meet the needs of different groups in the community	**Plan makers should examine current and future trends of population and household groups, current housing stock size and tenure.**	How should the needs for all types of housing be addressed?	Housing and economic development needs assessments	Methodology: assessing housing need	Reference ID: 2a-021-20150326
4. Community facilities	Assess quality and capacity of health and social care infrastructure, among other facilities	**Consider health & wellbeing and health infrastructure, working with relevant partners, when making plans and in planning decision making.**	What is the role of health and wellbeing in planning?	Health and wellbeing	What is the role of health and wellbeing in planning?	Reference ID: 53-001-20140306
7. Impact assessment		**A health impact assessment may be a useful tool to use where there are expected to be significant impacts.**	How should health and well-being and health infrastructure be considered in planning decision	Health and wellbeing	What is the role of health and wellbeing in planning?	Reference ID: 53-001-20140306

CCC sub-theme	Related NPPF principle	Text summary	Paragraph title	PPG level 1 theme	PPG Level 2 theme	Reference ID
s			making?			

APPENDIX 6: RESOURCES AVAILABLE TO SUPPORT AN ASSESSMENT OF FUTURE SPECIALIST HOUSING NEEDS

Resource	Source	Location
Methodology for assessing future needs for specialist housing	National Housing Federation, Housing Learning & Improvement Network et al., 2012. Housing for Later Life – planning ahead for specialist housing for older people	http://www.housinglin.org.uk/Topics/type/resource/?cid=8654
Description of methodology for assessing future needs for specialist housing	Cambridge Centre for Housing and Planning Research, Three Dragons, Land Use Consultants and Heriot Watt University, 2012. The role of the planning system in delivering housing choices for older Londoners	http://www.london.gov.uk/sites/default/files/Housing%20choices%20for%20older%20Londoners.pdf
Description of methodology for assessing future needs for specialist housing (Institute of Public Care, Oxford Brookes University model)	Staffordshire Flexicare Housing Strategy 2010-15	http://www.staffsmoorlands.gov.uk/sites/default/files/documents/pages/Staffs%20FCH%20Strategy%202010-2015%20v1-00.pdf
Projections and prevalence data showing future needs of people with disabilities	Projecting Adult Needs & Service Information System (PANSI)	www.pansi.org.uk
Projections and prevalence data showing future needs of older people	Projecting Older People Population Information System (POPPI)	www.poppi.org.uk
Tool showing future specialist housing needs of older people	SHOP@ tool	www.housinglin.org.uk/Topics/browse/HousingExtraCare/ExtraCareStrategy/SHOP/SHOPAT/Dashboard/
List of available disability data	Department for Communities & Local Government, March 2015. Building Regulations: Guide to available disability data	https://www.gov.uk/government/publications/building-regulations-guide-to-available-disability-data

APPENDIX 7: LOCAL PLAN POLICIES WHICH ADDRESS SOCIAL CARE CHALLENGES

URBAN DESIGN POLICIES

NPPF Urban design Principle	Related PPG Urban design requirement*	Policy requirement included in Local Plans	Cambridge	East Cambridgeshire	Fenland	Huntingdonshire	South Cambridgeshire
Planning should promote active travel and use of public transport	Urban design should be accessible and understandable to all, and should enable efficient travel.	Require provision of high quality public (or community) transport	80: Supporting sustainable access to development - a	ENV 2: Design	LP7: Urban Extensions - k	LP 8: Sustainable Development Principles - i Eg. HU 1: Ermine Street, Huntingdon -d	SS/5: Waterbeach New Town - x TI/2: Planning for Sustainable Travel - 2e
		Promote active travel (cycling and walking)	80: Supporting sustainable access to development	ENV 2: Design	LP7: Urban Extensions - B LP15: Facilitating the Creation of a More Sustainable Transport Network in Fenland – (C) Designing Development Schemes	LP 8:Sustainable Development Principles - g,j LP 22:Sustainable Travel - a Large sites, eg SEL 1: Alconbury Weald - e	TI/2: Planning for Sustainable Travel - 1

NPPF Urban design Principle	Related PPG Urban design requirement*	Policy requirement included in Local Plans	Cambridge	East Cambridgeshire	Fenland	Huntingdonshire	South Cambridgeshire
		Develop convenient networks of cycling and walking routes/ Protect and enhance Rights of Way	80: Supporting sustainable access to development - B2,3	ENV 2: Design	LP15: Facilitating the Creation of a More Sustainable Transport Network in Fenland - For Walking & Cycling Infrastructure LP7 – Urban Extensions - p	LP 22: Sustainable Travel - c	SS/5: Waterbeach New Town - s,z,aa TI/2: Planning for Sustainable Travel - 2c
		Prioritise pedestrians and cyclists over cars/don't allow cars to dominate the street	56: Creating successful places - b 80: Supporting sustainable access to development - B1	ENV 2: Design	LP15: Facilitating the Creation of a More Sustainable Transport Network in Fenland - (C) Designing Development Schemes	LP 18: Quality of Design - c	
Create accessible developments that promote active use of public areas	Development proposals should promote accessibility and safe local routes by making places that connect appropriately with each other and are easy to	Ensure structure/legibility and permeability of walking routes	E.g. 25: Old Press/Mill Lane Opportunity Area - f	ENV 2: Design	LP17: Community Safety - c	LP 18:Quality of Design – c,d	HQ/1: Design Principles - c,f TI/2: Planning for Sustainable Travel - 2a
		Provide accessibility for those with mobility issues/inclusive design, meeting the needs of all	56: Creating successful places - b,k 59: Designing	ENV 2: Design	LP15: Facilitating the Creation of a More Sustainable	LP 22: Sustainable Travel - c	HQ/1: Design Principles - g

NPPF Urban design Principle	Related PPG Urban design requirement*	Policy requirement included in Local Plans	Cambridge	East Cambridgeshire	Fenland	Huntingdonshire	South Cambridgeshire
	move through Inclusive design, considering those with extra needs such as disabled people and older people, should be considered at every stage of the development process, including the early design stage.		landscape and the public realm - i 80: Supporting sustainable access to development - B4		Transport Network in Fenland - (C) Designing Development Schemes		
Create safe and accessible environments	Designing out crime and designing in community safety should be central to the planning and delivery of new development.	Design to reduce the threat of crime and improve community safety/ensure that buildings are orientated to provide natural surveillance	56: Creating successful places - d, g	ENV 2: Design	LP7: Urban Extensions - S LP16 - Delivering and Protecting High Quality Environments across the District - J LP17: Community Safety – d,g	LP 10: Health and Wellbeing - d	HQ/1: Design Principles - o
Plan for multifunctional green open space	Open space should be taken account of in planning, given the multiple benefits it	Protect open space	67: Protection of open space	LP7 – Urban Extensions - o	LP15: Facilitating the Creation of a More Sustainable Transport Network in	LP 7: Green Infrastructure LP 33: Protection of Open Space - Local Green Space	NH/6: Green Infrastructure

NPPF Urban design Principle	Related PPG Urban design requirement*	Policy requirement included in Local Plans	Cambridge	East Cambridgeshire	Fenland	Huntingdonshire	South Cambridgeshire
	provides including health. LPAs should assess needs and plan for open space, across administrative boundaries if necessary.				Fenland - For Walking & Cycling Infrastructure		
		Promote the provision of new open space, referring to a district open space strategy and local or national standards	68: Open space and recreation provision through new development	GROWTH 3: Infrastructure requirements	LP7: Urban Extensions - G LP16 - Delivering and Protecting High Quality Environments across the District - g	LP 7: Green Infrastructure - c	SS/5: Waterbeach New Town - k NH/6: Green Infrastructure SC/1: Allocation for Open Space SC/8: Open Space Standards
	Sufficient green infrastructure should be designed into a development to make the proposal sustainable	Protect, enhance and link up Green Infrastructure, supporting the aims of the Green Infrastructure Strategy	67: Protection of open space (supporting text)	GROWTH 3: Infrastructure requirements COM 5: Strategic green infrastructure	LP15: Facilitating the Creation of a More Sustainable Transport Network in Fenland - For Walking & Cycling Infrastructure	LP 7: Green Infrastructure - a-e SEL 1: Alconbury Weald - o,p	NH/6: Green Infrastructure

*The PPG references made here are not exhaustive; there may be many other relevant PPG references for each theme.

OTHER LOCAL PLAN POLICIES

CCC sub-theme	CCC requirement summary	Local Plans policy summary
2. Dwelling design	Providing an appropriate proportion of homes that are adaptable/accessible	Local Plans have differing requirements for accessible/Lifetime Homes (see table). Huntingdonshire's draft Plan caveats that dependent on the outcome of the Housing Standards Review, their policy may be subject to minor modifications.

CCC sub-theme	CCC requirement summary	Local Plans policy summary
3. Specialist housing needs, including:	Specialist housing (provision to be determined)	**Allocations** Fenland Local Plan has a broad policy requiring urban extensions to cater for people with special housing needs. Huntingdonshire draft Local Plan states that the Strategic Expansion Locations and Spatial Planning Areas will accommodate care homes for older people with a specified number of beds. It also makes specific allocations for residential care homes. **Development management policies** Cambridge, East Cambridgeshire and Huntingdonshire have development management policies supporting specialist accommodation. South Cambridgeshire's submission Local Plan only refers to specialist accommodation to say that this form of housing will not be subject to housing mix requirements.
		Huntingdonshire Draft Local Plan makes an allocation for 20 extra-care housing units (class 'C3'), and includes a development management policy supporting this type of accommodation. The Huntingdonshire Affordable Housing policy references that specialist or supported housing schemes may be provided where an identified need exists. No other Local Plan specifically refers to these types of specialist housing.
4. Community facilities that are accessible to all, including:	Formal and informal meeting space	All Local Plans have development management policies protecting against the loss of existing community facilities. Cambridge, East Cambridgeshire and Huntingdonshire have development management policies supporting applications for new community facilities. East Cambridgeshire Local Plan explicitly supports new or enhanced community facilities where opportunities to maximise shared use have been explored.
	Large activity/meeting spaces	Understandably, the Local Plans do not set detailed requirements for the required features of new community facilities.
	Hearing loop enabled	
	Features meeting specific needs such as buggy parking or a youth shelter	
	Accessible parking facilities	
	Work with families	
	Furnishing of a children's centre	
Impact Assessments		Fenland, Huntingdonshire and South Cambridgeshire have policies requiring Health Impact Assessments (see table in main body of report).

APPENDIX 8: GLOSSARY

Name	Acronym	Description
Cambridge sub-region Housing Market Area	Cambridge HMA	Housing Market Area comprised of seven districts: Cambridge, East Cambridgeshire Fenland, Forest Heath, Huntingdonshire, South Cambridgeshire and St Edmundsbury. These partners work together to assess and tackle housing issues across the Market Area.
Children, Families & Adults directorate	CFA	Cambridgeshire County Council directorate responsible for Adult Social Care, children's social care, learning, enhanced and preventative services, and older people and mental health services.
Community Infrastructure Levy	CIL	The Community Infrastructure Levy is form of developer contribution, introduced by the Planning Act 2008 as a tool for local authorities in England and Wales to help deliver infrastructure to support the development of their area. CIL is a fixed levy on new development, calculated by reference to the net increase in the gross internal floor area after allowing for any demolition, authorised by planning permission.
Developer contributions	-	Contributions made by developers to provide, or help provide, new infrastructure, facilities or amenities, or to supplement existing provision, where these are required as a consequence of the development being proposed, on its own, or as a result of the cumulative impact of development in the area. These usually take the form of section 106 agreements or Community Infrastructure Levy (see this glossary).
Development Management	DM	The process of assessing and determining planning applications, undertaken by the local planning authority.
Housing Market Area	HMA	A geographical area defined by household demand and preferences for all types of housing, reflecting the key functional linkages between places where people live and work. HMAs are defined in order to assess the need for market and affordable housing. How to identify an HMA is set out in the Planning Practice Guidance (see this glossary).
Lifetime Homes Standards	-	A series of sixteen design criteria intended to make homes more easily adaptable for lifetime use at minimal cost. The concept was initially developed in 1991 by the Joseph Rowntree Foundation and Habinteg Housing Association.
Local Plan	-	A plan which allocates land for development and includes policies for appropriate forms of development, prepared by district or other Local Planning Authorities.
Local Planning Authority	LPA	A local planning authority (LPA) is the local authority or council that is empowered by law to exercise statutory town planning functions for a particular area of the United Kingdom.

Name	Acronym	Description
National Planning Policy Framework	NPPF	A single document setting out government's planning policies for England and how these are expected to be applied.
Open Data	-	Data that is published in an open accessible format, is machine readable and is published under a licence that allows for free re-use. In practice, this means that: data is easy to find (data can be searched for on a single site); different datasets can be easily brought together (data is all in the same format); and data can be interrogated, manipulated and re-used (raw data rather than a pdf report, for example)
Planning Obligations		Planning obligations are legal contracts made under Section 106 of the 1990 Town and Country Planning Act. They are generally entered into by agreement between councils and landowners, although a landowner may also offer a unilateral, "one-sided", Section 106 obligation (see this glossary).
Planning Practice Guidance	PPG	A web-based resource published in March 2014, providing more detail on the policies set out in the NPPF. The PPG replaced a large number of previous planning guidance documents, following an external review commissioned by government.
Projecting Adult Needs & Service Information System	PANSI	A web-based data resource designed to help explore the possible impact that demography and certain conditions may have on populations aged 18 to 64.
Projecting Older People Information System	POPPI	A web-based data resource designed to help explore the possible impact that demography and certain conditions may have on populations aged 65 and over.
Section 106	S106	Planning obligations under Section 106 of the Town and Country Planning Act 1990 (as amended), commonly known as s106 agreements, are a mechanism which make a development proposal acceptable in planning terms, that would not otherwise be acceptable. They are focused on site specific mitigation of the impact of development. S106 agreements are often referred to as 'developer contributions' along with highway contributions and the Community Infrastructure Levy. The common uses of planning obligations are to secure affordable housing, and to specify the type and timing of this housing; and to secure financial contributions to provide infrastructure or affordable housing.
Strategic Housing Market Assessment	SHMA	Strategic Housing Market Assessments assess the need for market and affordable housing across the relevant Housing Market Area (see this glossary). They are identified in the NPPF and PPG as the primary evidence source for strategic housing needs.

APPENDIX 9: BIBLIOGRAPHY

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