

Accessible Housing: Age and Health Impacts on Housing Mix Housing Evidence Base Briefing Note 23 (BN23)

Summary

The NPPF is clear that ‘to deliver a wide choice of high quality homes, widen opportunities for home ownership and create sustainable, inclusive and mixed communities, local planning authorities should 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... older people, people with disabilities...).’

The health of the population is probably more descriptive of the housing needed to meet the specialist housing needs of the population as age is not always a determinant of a need for different types of housing. It is those members of the population, younger or older, that have a limiting long term illness or disability that are more likely to require accessible, adapted or specialist housing.

Significant numbers of people in Cornwall experience issues with mobility. 38% or 2 in 5 households in Cornwall contained at least one person with a long term health problem or disability. 9% of the population of Cornwall in 2015 was in receipt of either Disability Living Allowance or Attendance Allowance. 10% of the population in 2011 considered that their day to day activities were limited a lot by their health. Around one in five older people would like a home without stairs, and bungalows and accessible flats would seem an obvious choice for older and less able people of all ages.

Viability testing of development indicates that 25% of all new developments of 10 or more dwellings can be built to Building Regulation M4 (2) without impacting on the overall viability of the development. Therefore, the housing mix proposed is:

General Housing	General Accessible Housing M4 (2)
75%	25%

The Cornwall Local Plan: Strategic Policies Policy 6 on housing mix proposes that in responding to the requirements of a changing population and of particular groups in the community, the supply of accessible and specialist housing (including ground floor flats, flats with lifts and bungalow accommodation) which is able to meet people’s needs throughout their lifetimes based on locally derived evidence of need and demand will be increased. A target of 25% of dwellings in schemes of 10 or more is proposed.

In addition, a good proportion of existing housing can be adapted and improved to make it more accessible to older and less mobile people.

Key Outcomes

Local Plan policy on housing mix proposes that 25% of dwellings in schemes of 10 or more should be accessible or specialist housing (including ground floor flats, flats with lifts and bungalow accommodation) which is able to meet people’s needs throughout their lifetimes based on locally derived evidence of need and demand.

In terms of wheelchair accessible homes, applications will be subject to negotiation on a scheme by scheme basis depending on an identified local need for such accommodation.

Key Facts

10% of the population of Cornwall have mobility issues as their activities are limited a lot.

Around 87,000 households in Cornwall, almost two in every five households, contain at least one person with a long term health problem or disability.

Source: Census, DWP, POPPI

National Policy Context

The National Planning Policy Framework (NPPF)ⁱ (paragraph 50) states that ‘to deliver a wide choice of high quality homes, widen opportunities for home ownership and create sustainable, inclusive and mixed communities, local planning authorities should: 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); identify the size, type, tenure and range of housing that is required in particular locations, reflecting local demand’.

The Housing Strategy for Englandⁱⁱ is clear that ‘good housing for older people can enable [older people] to live healthy, independent lives and reduces pressure on working families in caring for older relatives. It can also prevent costs to the NHS and social care. For some older people a move to a smaller, more accessible and manageable home can also free up much needed local family housing’.

The concept of ‘lifetime homes’ in conjunction with ‘lifetime neighbourhoods’ described Government thinking directed at making the UK housing stock more suitable for all. ‘Delivering Lifetime Homes, Lifetime Neighbourhoodsⁱⁱⁱ’ prepared a set of policies around a national strategy for housing in an ageing society, and out of this was commissioned HAPPI – Housing our Ageing Population: Panel for Innovation. HAPPI was tasked with understanding what further reform is needed to ensure that new build specialist housing is required to meet the needs and aspirations of the older people of the future.

According to HAPPI there are 3 main groups of housing that is available for older people:

- Mainstream Housing which is not designated for any particular group but will include general needs housing, lifetime homes and adapted homes (now replaced by M4 (2) and M4 (3));
- Specialised Housing which is housing specifically for older people with access to support and care. This will include sheltered/retirement housing, very sheltered or assisted living, extra care, close care and retirement villages;
- Residential Care or Care Homes which is institutional accommodation with care services and facilities, and can include residential homes, nursing homes and specialised care homes.

This briefing paper concentrates on the first HAPPI group – mainstream housing which includes lifetime homes and adapted homes.

Volume 1 of Part M of the Building Regulations is divided into 3 requirements and applies to all new dwellings being built and those that are materially altered. Requirement M4 (1) Visitable Dwellings indicates that reasonable provision should be made for people to a) gain access to and b) use the dwelling and its facilities. This requirement is mandatory and should ensure that the majority of people are able to visit some parts of any new building. M4 (2) Accessible and Adaptable Dwellings and M4 (3) Wheelchair User Dwellings are optional standards.

Guidance has recently been made available from NPPG on ‘Housing – Optional Technical Standards^{iv}’ on the evidence that is required by local authorities to demonstrate a need to set higher accessibility, adaptability and wheelchair housing standards. The guidance suggests that the following data should be taken into account in any assessment:

- The likely future need for housing from older and disabled people (including wheelchair user dwellings);
- Size, location, type and quality of dwellings needed to meet specifically evidenced needs (e.g. retirement homes, sheltered homes or care homes);
- The accessibility and adaptability of existing housing stock;
- How needs vary across different housing tenures;
- The overall impact on viability.

Where a local planning authority intends to adopt a policy to provide enhanced accessibility or adaptability they should do so only by reference to requirement M4 (2) and/or M4 (3) of Building Regulations.

Local Policy Context

Cornwall Council's Housing Strategy^v has set a number of priorities which include those that directly relate to housing mix in terms of age related issues or disability:

- Priority 2: Finding Smarter Housing Solutions - We will ensure that people have free access to a range of housing options which can help them to make their own housing choices, including the chance to remain in their own home and live as independently as possible. We will endeavour to ensure that people have a safe, secure home they can call their own and that temporary accommodation is only used as a last resort. We will tackle homelessness in Cornwall, with a strong emphasis on preventing people from losing their existing home.
- Priority 4: Creating Sustainable Communities - We will ensure that housing activities contribute towards social wellbeing and make a difference to deprived and excluded communities

Cornwall's Long Term Accommodation Strategy^{vi} sets out the County wide position for accommodation for people with care and support needs. This Strategy is clear that older and less able people have many different needs and aspirations for their accommodation solutions in later life and so a good mix of accommodation types is required. Housing, care and support needs for older people can be met in a variety of settings: specialist supported housing, extra care housing, other care settings and also via floating support services or home care in mainstream housing. Without suitable attractive offers of alternative housing and care home solutions, older people will remain in potentially unsuitable, hard to maintain housing.

Definitions

Accessibility and accessible housing - inclusive design aims to give the widest range of people, including those with physical and/or sensory impairments, older people and children, convenient and independent access into and around the built environment (externally and internally) and also equal access to services. A Lifetime Home^{vii} (now M4 (2) Accessible and Adaptable Dwellings) will be designed with particular attention to circulation within the home and external routes to transport infrastructure. Pathways, hallways, stairways and access to floors above, doorways and spaces to approach and reach essential facilities and controls in the home will be taken into consideration.

Adaptability or adapted housing - adaptability means that a building or product can be simply adapted to meet people's changing needs over time or to suit the needs of different users. Any subsequent adaptations should be more cost-effective because the original design accommodates their future provision from the outset. In a Lifetime Home (M4 (2) Accessible and Adaptable Dwellings), non-apparent integral design features are ready to assist adaptation for a household that has a family member with

a temporary or permanent disability or a progressive condition that is making movement around the home or between floors difficult. A member of the household, or a visitor, will be able to live, sleep and bath solely on the entrance level for a short period, or can benefit from step-free access to upper floor facilities.

'Mainstream' or 'general' housing – is used to describe housing in the open market

Why Plan to Meet Different Housing Needs?

The health of the population is probably more descriptive of the housing needed to meet the needs of the population as age is not always a determinant of a requirement for different types of housing^{BN13}. That is, many older people are fit and active and can meet their needs in 'general' housing. It is those members of the population, younger or older, that have a limiting long term illness or disability that are more likely to require accessible, adapted or specialist^{BN27} housing or ultimately residential care^{BN36}.

Work^{viii} has been undertaken to highlight the long term value of providing high quality housing specifically designed for older people as it is this age group that has higher levels of mobility and other health related issues. The provision of housing for older and less able people includes potential savings through:

- Reducing the risks of falls;
- Protecting against the effects of cold homes and fuel poverty;
- Enabling earlier discharge from, and fewer readmissions to, hospital;
- Preventing the need (both temporary and permanent) for institutional residential care; and
- Reducing ill health costs associated with isolation and loneliness.

Increasing the amount of general housing that is suitable for older and less able people (e.g. smaller homes, bungalows and serviced flats), together with more specialist housing, can have the added benefit of freeing up larger homes in communities that are required by families.

Given that mobility decreases as people age and hence the need for accessible housing increases, this paper uses facts around people aged 65 or more in particular to indicate the need for accessible housing.

Past Trends in the Health of the Population

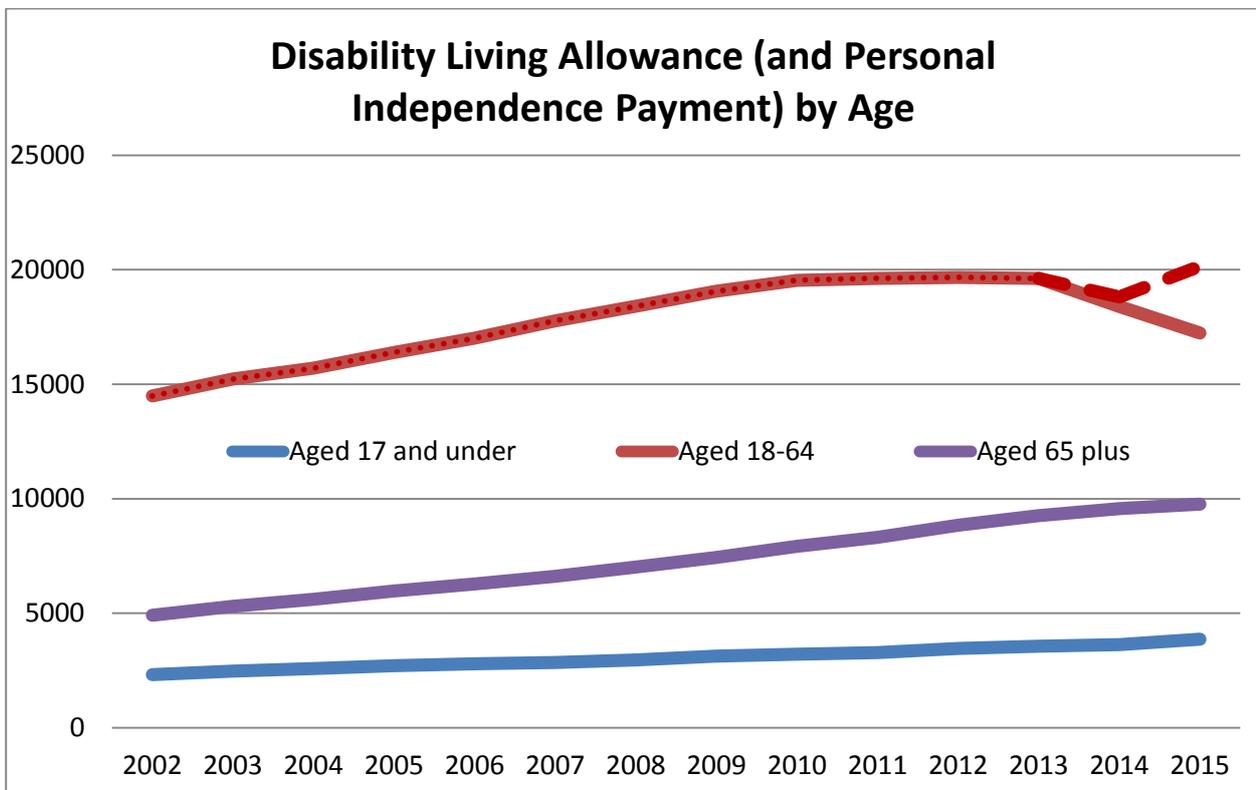
Disability Living Allowance provides the best source of data on the number of people with disabilities in Cornwall that are claiming a benefit related to their condition. Other disability related benefits^{BN22} have been subject to significant changes over the last three years and it is difficult to use them as a consistent source.

Disability Living Allowance (DLA) is a tax-free benefit to help claimants with the extra costs they may have because they are disabled. It is not 'means tested', so having savings or other income won't affect whether people can claim and it will not usually affect any other benefits they may be getting. As such it constitutes a useful source of data on people whose lives are affected to some extent by disability and which may have an impact on the type of housing that they require. There are three main strands:

- Disability Living Allowance for children - helps with the extra costs of looking after an eligible child who is under 16, has difficulties walking, and or, needs more looking after than a child of the same age;

- Disability Living Allowance for people aged 16 to 64 - helps with the extra costs caused by long term ill-health or a disability. DLA is being replaced by Personal Independence Payments (PIP), and is the basis for financial support to help offset the additional costs faced by individuals with disabilities;
- Disability Living Allowance is paid to people aged 65 or more if they were aged less than 65 when they made their first claim. Attendance Allowance is paid to people aged 65 or more if they were aged 65 or more when they made their first claim (see below for more information).

The number of people claiming Disability Living Allowance in Cornwall has increased over time to 2013 in each of the broad age groups. The effect of the introduction of PIP is seen in the dip in claimants aged 18-64 from 2013 onwards (unbroken red line) although by adding those receiving PIP payments to the numbers receiving DLA (dotted red line) indicates that the number of people aged 18-64 in receipt of a disability related benefit are still rising after a dip in 2014.



Disability Living Allowance can also be used to indicate the severity of a claimants' disability by the level of help a person needs in terms of care and mobility. These numbers too reflect the decrease in numbers receiving DLA since the introduction of PIP (please note that there is duplication between the two DLA components):

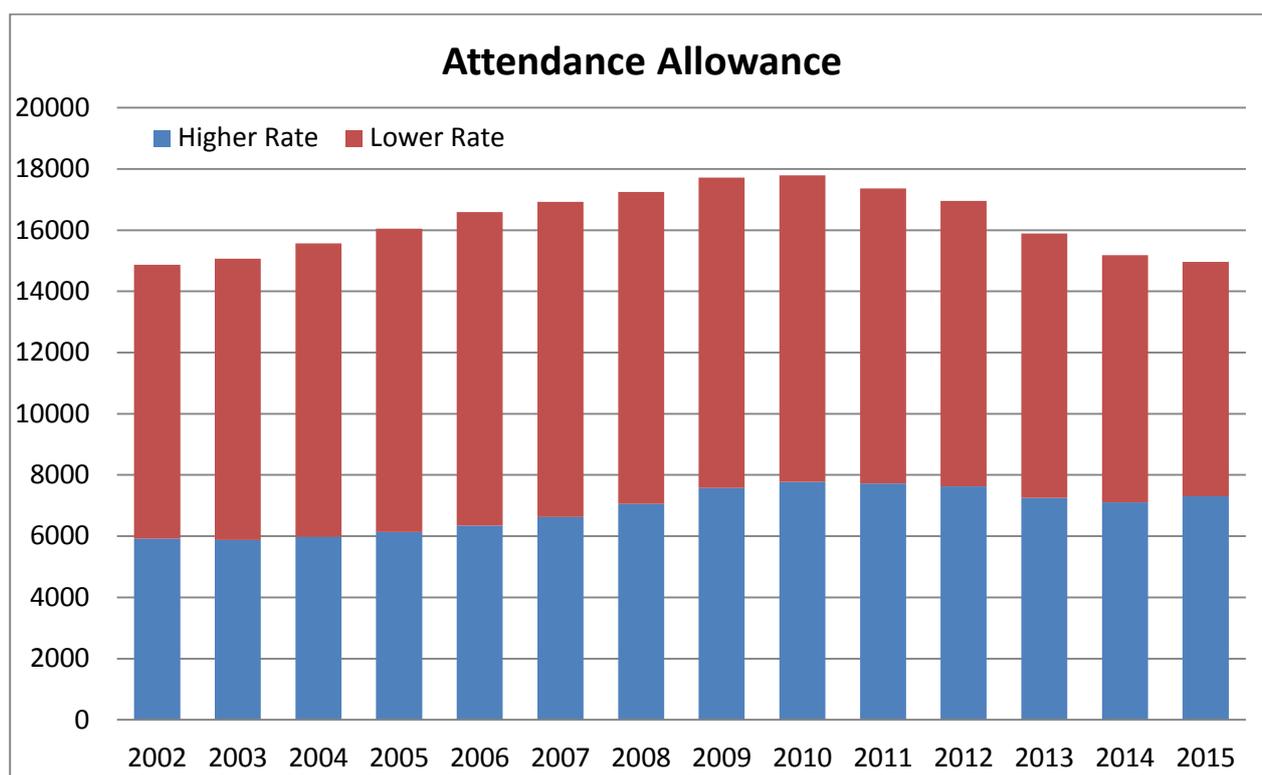
Date	Care Component			Mobility Component	
	Lowest – Help for some of the day or with preparing cooked meals	Middle – Frequent help or constant supervision during the day, supervision at night or someone to help you while on dialysis	Highest – help or supervision throughout the day and night or for the terminally ill	Lower – Guidance or supervision outdoors	Higher – have other more severe walking difficulties
2011	9,330	11,130	6,990	9,120	17,770
2012	9,540	11,450	7,240	9,550	18,010
2013	9,700	11,600	7,550	9,990	18,130
2014	9,300	11,360	7,630	9,970	17,550
2015	8,760	11,240	7,840	9,980	17,000

Attendance Allowance is a tax-free benefit for people who have a disability and need someone to help look after them. Attendance Allowance is payable to those aged 65 or over, were aged 65 or more when they first claimed, and the following apply:

- They have a physical disability (including sensory disability, e.g. blindness), a mental disability (including learning difficulties), or both; and
- Their disability is severe enough for them to need help caring for themselves or someone to supervise them, for their own or someone else’s safety.

Attendance Allowance is paid at 2 different rates and how much a person gets depends on the level of care that is needed because of disability. The lower rate is given to someone who requires frequent help or constant supervision during the day, or supervision at night and the higher rate to a person who need help or supervision throughout both day and night, or is terminally ill.

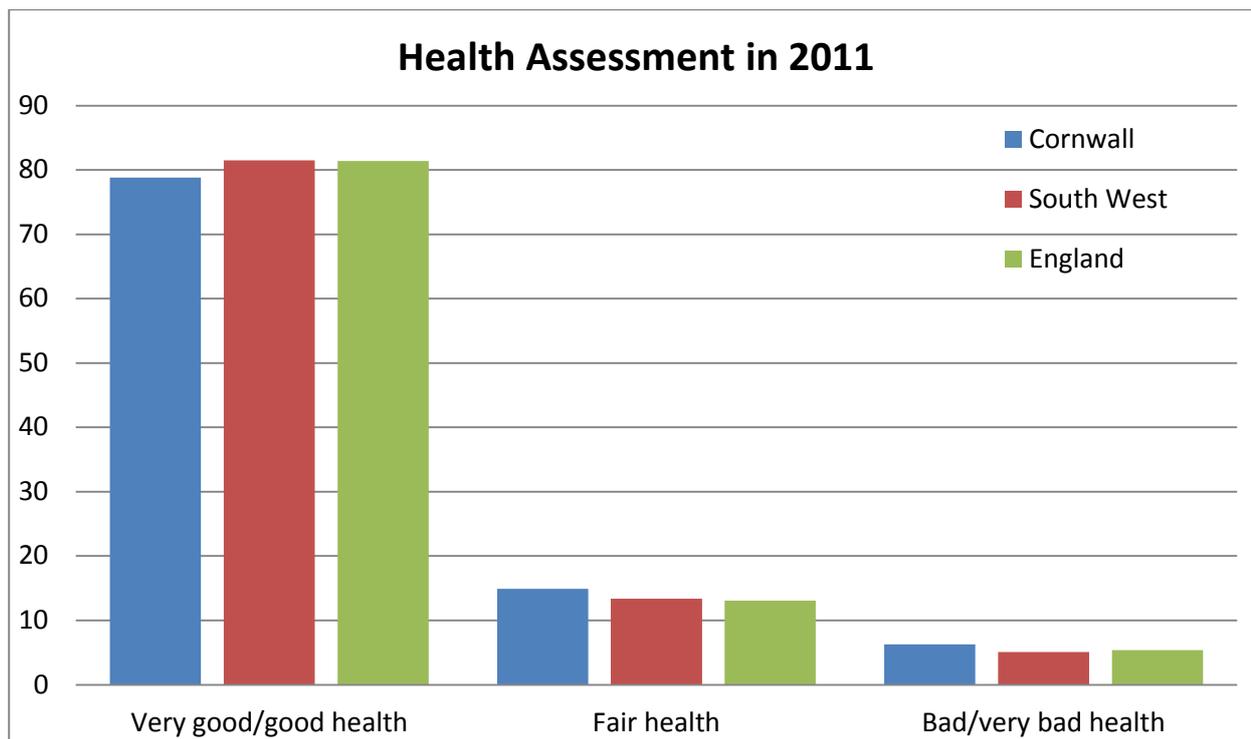
The number of people claiming Attendance Allowance rose consistently from 2002 to 2010, and has dipped slightly since although this is most likely to be as a result of changing retirement ages for women and is shown as a corresponding increase in Disability Living Allowance for those aged 65 or more.



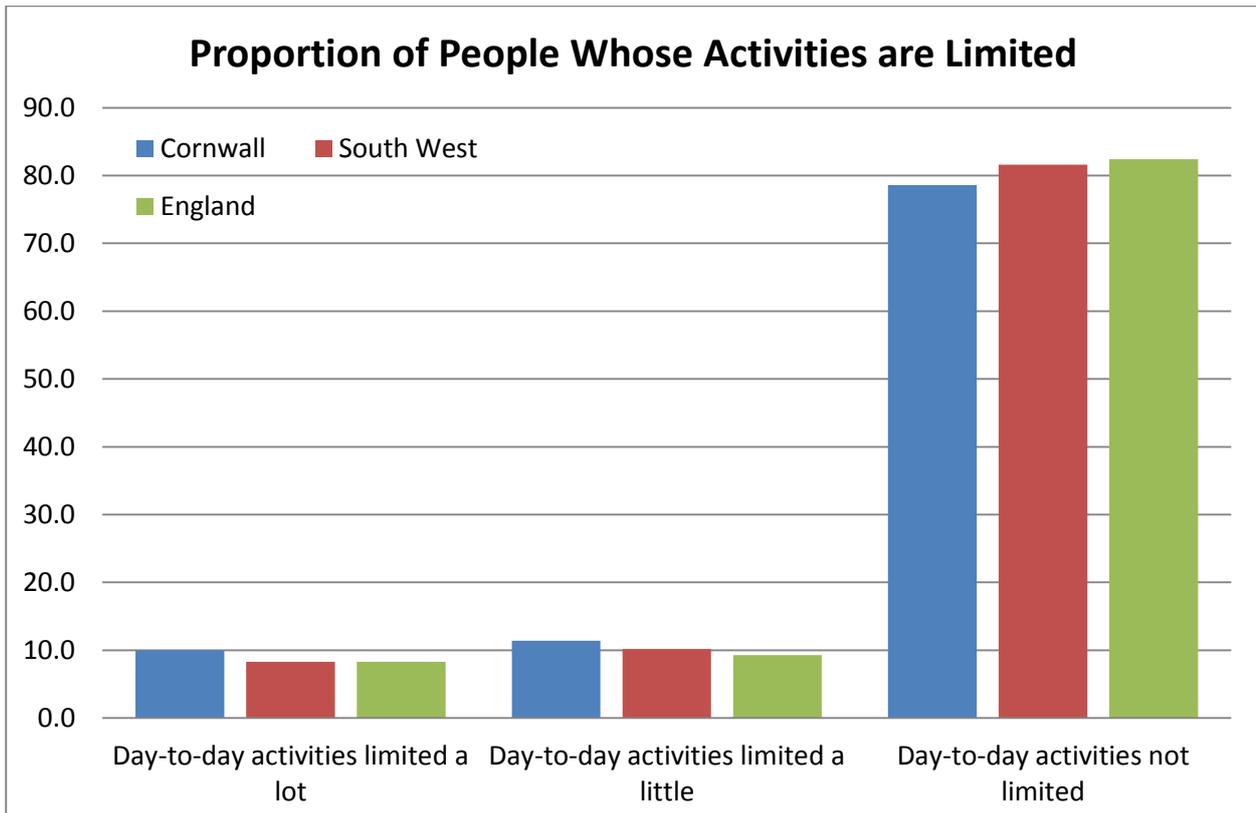
Current Trends in the Health of the Population

In terms of the Disabled Living Allowance and Attendance Allowance, there are an estimated 49,400 persons in Cornwall as at May 2015 in receipt of a disability related benefit which equates to about 9% of the total population.

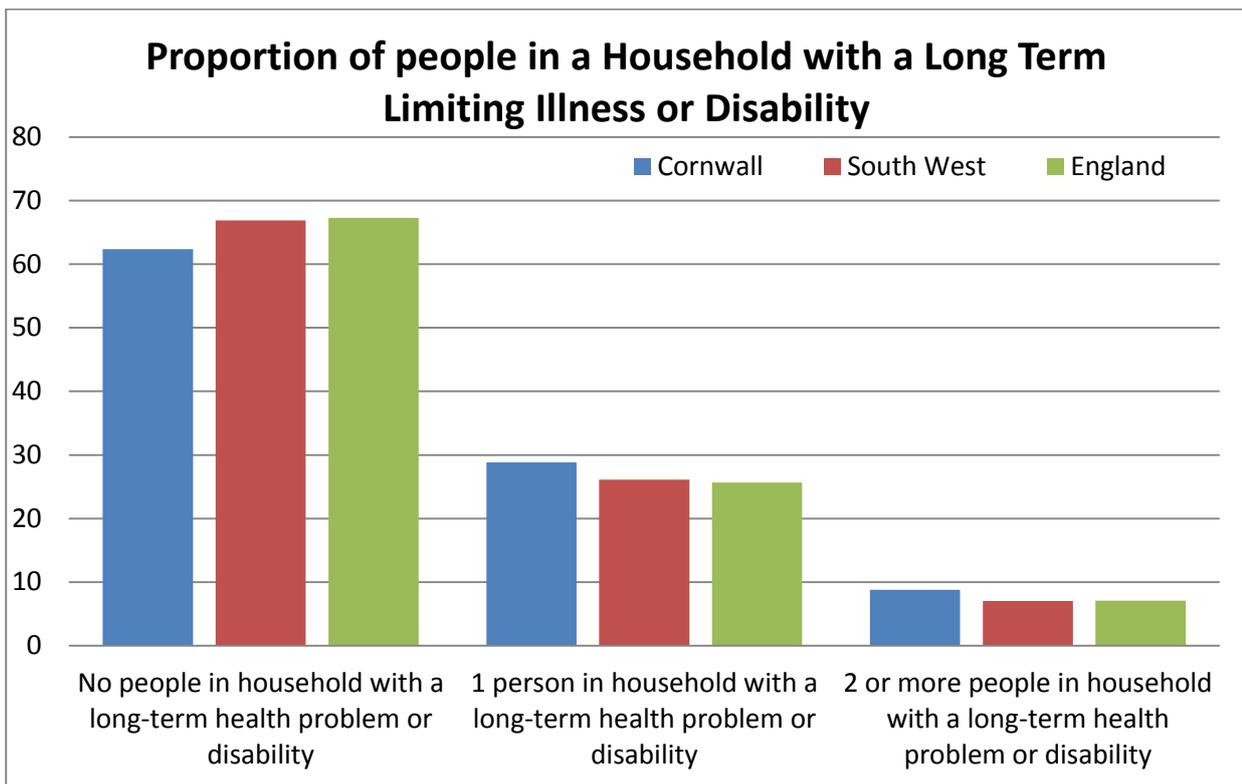
The general health question within the 2011 Census^{ix} was a self-assessment of a person's general state of health. People were asked to assess whether their health was very good, good, fair, bad or very bad. This assessment is not based on a person's health over any specified period of time. The graph below shows that a lower proportion of people in Cornwall compared to the average for the South West and England considered their health to be good or very good and a higher proportion of people considered their health to be fair or bad or very bad.



Currently, the activities of just over one in five people in Cornwall are limited a little or a lot by a long term health problem or disability. This is indicated in the following graph that shows the proportion of people whose activities were not limited, limited slightly or limited considerably (Census 2011). Cornwall contains a higher proportion of people whose activities are limited to some extent than on average across the South West and England. Those whose activities are limited a lot equates to about 10% of the population of Cornwall which is very similar to the proportion in receipt of a disability related benefit (9%).



Around 87,000 households in Cornwall, almost 2 in every five households, contain at least one person with a long term health problem or disability. This is indicated in the following graph that shows the proportion of households containing a person with a long term health problem or disability (Census 2011). Cornwall has a higher proportion of households containing at least one person with a long term health problem or disability when compared with the average for the South West and England.

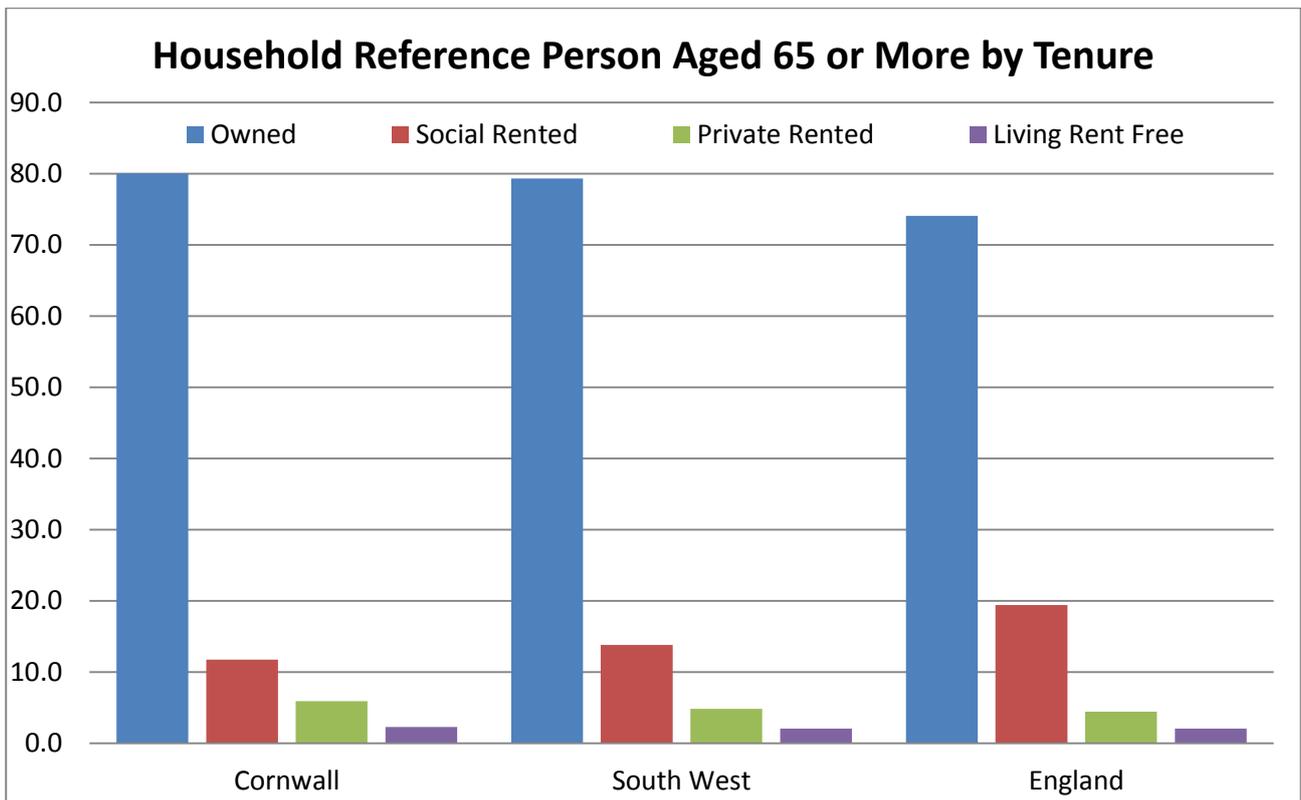


Wheelchair users face particular design and accessibility barriers, both in and around the home and in the wider environment. The 'Mind the Step'^x report has identified that the 'majority of homes in England (84%) do not allow someone using a wheelchair to get to and through the front door without difficulty and only 0.5% of homes are reported to be accessible and adaptable'. This report offers a methodology for identifying the number of wheelchair users whose housing needs are not being met. For Cornwall this would suggest, given an estimated household population of 239,700 for 2015, that there are likely to be around 7,200 wheelchair user households of which 575 households are not having their housing needs met. The report does suggest that numbers could be higher if an area has an older population than other areas as there are likely to be more wheelchair users amongst older people, and this could apply to Cornwall^{BN3}. Analysis^{xi} of the Cornwall housing register indicates that in November 2015, 70 households were in need of accommodation that enabled full wheelchair use and 150 households included someone that needed to use a wheelchair indoors.

Obesity is on the increase and is another health issue that can affect the type of housing that people will need. Although it may not be defined as a 'disability' in benefit terms in its own right, it can affect the ability of some to move around and perform certain tasks and therefore the type of housing needed to remain independent. The number of people in Cornwall and the Isles of Scilly^{xii} who are estimated not to be a healthy weight (that is overweight or obese) is 170,680. This represents about one in three of the population. Within this total the number of people who are estimated to be at a higher risk (that is obese) is 109,306, which represents about one in five of the adult population. The Health Profile^{xiii} for Cornwall indicates that the proportion of obese adults is not significantly different from the England average. However, Hospital Episode Statistics data for 2011/12 would suggest that obesity is one of the reasons behind significantly higher numbers of people (943 people per 100,000 persons) in Cornwall being admitted to hospital than elsewhere (respectively 523 or 502 people per 100,000 persons) for the South West or England.

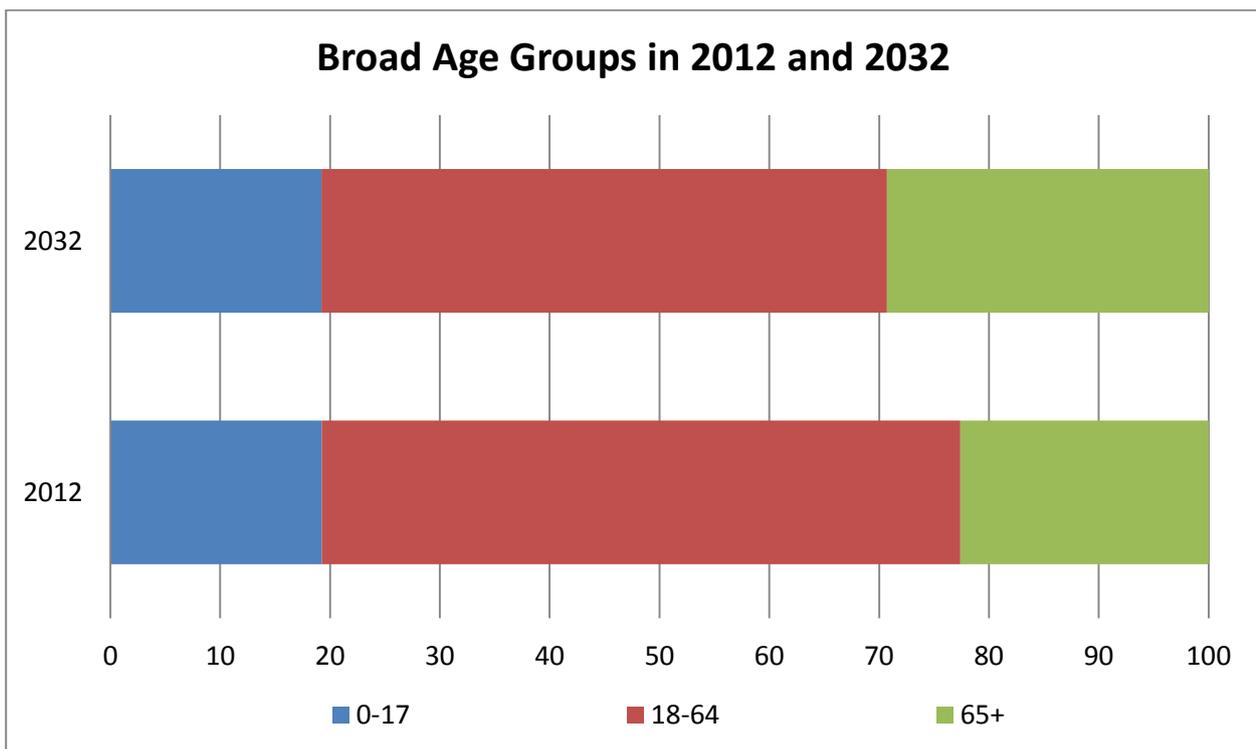
Current Trends in Housing Tenure for Older People

Nationally, three quarters of all older households are owner occupiers but only a quarter^{xiv} of specialist housing is for purchase. In Cornwall^{xv} and the South West, 80% of households over 65 own their own home as indicated in the chart below.



Future Trends in Households with Health or Age Related Issues

The demographic ^{BN3 BN4} and economic ^{BN5} profile of Cornwall is likely to change during the next twenty years, and different parts of the housing market will be affected by these changes in different ways. The following chart gives an indication of how the proportion of broad age ranges for people in Cornwall is predicted to change over the next twenty years and how the proportion of older people is predicted to significantly increase.



The Cornwall Strategic Housing Market Needs Assessment^{xvi} analysis^{BN2} identified that the overall capacity of suitable stock would need to continue to grow in Cornwall in order to meet needs:

- Older Persons – necessary to provide housing for older people to enable them to live independently at home for as long as possible, as well as providing a choice of more specialist older persons' accommodation. This particular group (aged 65+ years) was projected to grow strongly locally and it was clear that future demographic changes would have a profound impact upon housing need, with an increasing demand for accommodation for older people across the area. Older person households exhibit particular requirements and needs that require consideration by Cornwall Council, such as adaptations and support in the home to remain living independently.
- Households with support needs in Cornwall – those households with learning difficulties were anticipated to rise considerably.

In terms of Older Persons, the Projecting Older People Population Information^{xvii} (POPPI) database suggests that for Cornwall in the future:

- A large increase (44%) in the number of people aged 65+ who will live alone by 2030 (from 46,380 to 66,875) as well as a huge increase of 72% in the number of people aged 65+ who will live in a care home (2,900).
- In terms of those aged 65+, there were predicted to be 46,000 people with a limiting long term illness whose day to day activities were limited a little by 2030 – an increase of some 40% from 2014. In terms of those whose activities were limited a lot, numbers were predicted to rise by some almost 50% to 43,225 by 2030.
- Obesity and morbid obesity data for the 65 plus age group indicates that the number of people with a BMI of 30 plus will increase by around 29% from 33,900 in 2014 to 43,900 by 2030.
- 51,350 people aged 65 plus were considered to be unable to manage at least one domestic task on their own in 2014, and this number is predicted to increase by around 50% to 76,900 by 2030. (Tasks included household shopping, washing and drying dishes, cleaning windows, jobs involving climbing, using a vacuum cleaner, washing clothes by hand, opening screw tops, etc.)
- 23,100 people aged 65 plus were considered to be unable to manage at least one mobility activity on their own in 2014, and this number is predicted to increase by around 53% to 35,400 by 2030. (Activities include: going out of doors and walking down the road, getting up and down stairs, getting around the house on the level, getting to the toilet, getting in and out of bed).
- 42,250 people aged 65 plus were considered to be unable to manage at least one self-care activity on their own in 2014, and this number is predicted to increase by around 49% to 62,950 by 2030. (Activities include: bathing, showering or washing all over, dressing and undressing, washing face and hands, cutting toenails, taking medicines).
- Around 8,500 people aged 65 plus were predicted to have dementia in Cornwall in 2014 and this number was expected to increase by around 69% to almost 14,750 by 2030.
- The number of people aged 65 plus with a learning disability was predicted to increase by some 37% from 2,675 in 2014 to 3,650 in 2030.

The increase in health related issues in the above analysis indicate that housing to meet a range of health related issues will continue to be required in Cornwall.

In terms of other households with support needs, the Projecting Adult Needs & Service Information^{xviii} (PANSI) database suggests that for Cornwall in the future:

- There would be a small increase of some 3% of people aged 18-64 with a learning disability between 2014 and 2030 (7,575 to 7,825).
- 26,200 people aged 18-64 had a moderate physical disability in 2014 and this is predicted to increase by around 3% to 26,825 by 2030.
- There were an estimated 8,050 people with a serious physical disability in the 18-64 age groups in 2014 and the number was predicted to increase by around 3% to almost 8,300 by 2030.

70% of adults in Cornwall are either overweight or obese^{xix} compared to 64% across England.

Future Impact on Planning for Housing

The majority of older and less able people move within the mainstream housing market and it is therefore difficult to demonstrate what sort of mainstream housing is available for these types of households.

Work undertaken by Shelter^{xx} has done some analysis on existing housing stock in England and its current and potential accessibility in terms of the 'lifetime homes'^{xxi} standards, as follows and this indicates that improvements can be made to make a significant proportion of existing stock more accessible to older and less mobile people.

Feature	Already has	Could with amendments	Not feasible
Facilities at entry level			
Potential living space	94%	0%	3%
Potential bedroom	83%	0%	6%
Toilet	60%	25%	9%
Shower/bath	23%	57%	9%
Entering and leaving the home			
Level access to the main entrance	16%	59%	23%
Wheelchair access to the main entrance	20%	80%	0%
Car parking space	54%	18%	2%

In terms of new build, around one in five older people would like somewhere without stairs according to the 'YouGov'^{xxii} survey, so bungalows would seem an obvious choice for older people, as well as being most suitable for less able people. There is little information available on the number of bungalows there are in housing stock at a local level although English Housing Survey data would suggest that there are about 2,000,000 bungalows across England. Developers are however more likely to build houses and flats than bungalows as they represent a cheaper option to develop in terms of land take. It is suggested that the majority of developers are not generally building mainstream housing with the older person in mind as they are far more likely to be targeting the first time buyer market given current housing initiatives^{xxiii}. Since the 1980s, the development of new bungalows^{xxiv} has been on the decline hovering around 2% of all dwellings that are given planning permissions.

Future Housing Mix

38% of all households in 2011 in Cornwall contained at least one person with a limiting long term illness or disability. 42%, some 36,000 of these households were all aged 65 or more. In terms of housing needed to meet the needs of this proportion of the population we may wish to consider a target of around 35-40% of new housing being 'accessible' to a certain extent, the remainder being more general housing.

There is no one definition of accessible housing. To some it means a home without steps to the front door, to others non-slip flooring, raised toilet seats and grab rails – and to housing professionals it means Part M4 (2) and/or M4 (3) of Building Regulations.

Accessible housing to meet the general needs of people with some health or mobility issues would include bungalows and purpose built flats. These types of dwellings would enable:

- Making it easier to get into and out of homes by, for example, widening doors, ensuring level access or in some cases installing ramps;
- Improving the access and movement around the home to enable a person with a disability or mobility issue to be able to get around easily. This can be achieved by providing wider, level, and in some cases, lowered access to the bedroom, kitchen, toilet, wash hand-basin and bath/shower facilities;
- Providing low cost and fuel efficient heating systems in homes to meet the needs of people with a disability or mobility issues.

In considering what proportion of housing should be built to Building Regulation M4 (2), the potential impact on the viability of development needs to be considered. As part of the Local Plan examination process it is proposed that the accessibility standards are amended so that 25% of all market and affordable housing is provided to Lifetime Homes standards – now amended to Building Regulation M4 (2). The report^{xxv} on viability concluded that the ‘additional accessibility standards proposed by Cornwall Council have little impact on viability. While the standards do result in additional costs to development these are minor and are unlikely to render development unviable.’ As a consequence, revised Policy 14 of the Cornwall Local Plan proposes that 25% on all developments of 10 or more dwellings Building Regulation M4 (2).

In summary, the evidence suggests the following proportion of housing mix is proposed:

General Housing	General Accessible Housing M4(2)
75%	25%

Local Plan policies for wheelchair accessible homes should be applied only to those dwellings where the local authority is responsible for allocating or nominating a person to live in that dwelling. As such, applications will be subject to negotiation on a scheme by scheme basis depending on an identified local need for such accommodation.

Future Housing Tenure

Research by the Joseph Rowntree Foundation^{xxvi} confirms that despite the majority of older people owning their own homes outright, 77% of specialist housing is for rent. The report goes on to say that older people move less often than younger people because they neither need or want to move, and older owner occupiers are especially reluctant to move from freehold to leasehold housing such as retirement properties with potentially high service charges. A higher proportion of households in Cornwall own their own home than on average across England^{BN13} so this issue is likely to be significant.

Many people would prefer to remain living in mixed-age housing and communities – and staying where they are with housing adaptations if required or moving to an

accessible home can be the right choice. This would suggest that some people may consider moving to 'accessible housing' if the right tenure options were available to them. A consideration of house tenures should be included when planning to deliver accessible housing so as to be a more attractive option to people considering moving to this type of housing.

Future House Size

Nationally, many older people want a home with at least two bedrooms^{xxvii} but the majority of specialist provision has only one bedroom. Official definitions of under-occupation do not reflect people's views and preferences. This report goes on to say that analysis of moves by older households in the last five years within the private sector (rent or owner-occupier) show that 87% move into a dwelling with two or more bedrooms. Building accessible homes that have only one bedroom is unlikely to appeal to the vast majority of older people considering a move.

In Cornwall there was a higher proportion of two and three bedroom properties^{BN13} than on average across England which is related to the rural nature of the area, and a lower proportion of one bedroom properties. Households in Cornwall are used to living in larger properties and as a consequence significant numbers of older people are likely to be reluctant to move to one bedroom accessible housing.

A consideration of different house sizes in terms of bedrooms should be included when planning to deliver accessible housing so as to be a more attractive option to people considering moving to this type of housing.

Development Industry Issues

The current climate is challenging and market conditions remain difficult for developers making them more risk adverse and combined with a lack of public money this has led to factors^{xxviii} limiting the choice of mainstream and specialist housing, including:

- Housing and planning issues including a lack of imaginative ideas, strategic vision and data on older people's housing;
- Specialist retirement developers offer limited models and general house builders do not design for or target older people as a market segment. There is a need for a change of products, image and marketing especially to attract people in their 50's and 60's;
- There has been limited use of creative partnerships between general house builders, specialist retirement developers, housing associations and local authorities although interest is growing.

In terms of the design of housing for older people, HAPPI recommendations include:

- New retirement homes should have generous internal space standards, with potential for three habitable rooms and designed to accommodate flexible layouts;
- Care is taken in the design of homes and shared spaces, with the placement, size and detail of windows, and to ensure plenty of natural light, and to allow daylight into circulation spaces;
- Apartments have balconies, patios, or terraces with enough space for tables and chairs as well as plants;
- Homes are designed to be 'care ready' so that new and emerging technologies, such as telecare and community equipment, can be readily installed;
- Homes are energy-efficient and well insulated, but also well ventilated and able to avoid overheating by, for example, passive solar design, the use of native

deciduous planting supplemented by external blinds or shutters, easily operated awnings over balconies, green roofs and cooling chimneys; and

- Adequate storage is available outside the home together with provision for cycles and mobility aids, and that storage inside the home meets the needs of the occupier.

Risk Assessment

The impact of welfare reform on people in receipt of benefits is not as yet fully known and will need to be monitored for potential impacts on the type of housing people will need and be able to access. One analysis^{xxix} of the impact of welfare reforms identifies that the available evidence suggests that disabled households in particular are likely to face significant impacts as a result of cumulative reforms. Changes to the Benefits system were cited as likely to represent a considerable challenge for people with physical and/or learning disabilities, particularly the occupancy tests, which was expected to have a punitive impact on people with physical and/or learning disabilities with a spare bedroom, who would be required to downsize or make up the shortfall in housing benefit to continue to pay their rent.

Use in Cornwall Local Plan

Housing mix is part of the context for housing and as such is included in general housing papers including:

- Housing Topic Paper (February 2011) accompanied the Core Strategy Options Report - <http://www.cornwall.gov.uk/Default.aspx?page=32790>
- Housing Topic Paper (January 2012) accompanied 'Our Preferred Approach for a Core Strategy', Cornwall Local Plan: Strategic Policies Pre Submission version and Cornwall Local Plan: Strategic Policies Proposed Submission version - <http://www.cornwall.gov.uk/Default.aspx?page=32791>

The Cornwall Local Plan: Strategic Policies Policy 6 on housing mix proposes that in responding to the requirements of a changing population and of particular groups in the community, the supply of accessible and specialist housing (including ground floor flats, flats with lifts and bungalow accommodation) which is able to meet people's needs throughout their lifetimes based on locally derived evidence of need and demand will be increased. A target of 25% of dwellings in schemes of 10 or more is proposed.

Local Plan policies for wheelchair accessible homes should be applied only to those dwellings where the local authority is responsible for allocating or nominating a person to live in that dwelling.

Examination Findings

No examination findings specifically relating to housing mix and long term illness or disability have been identified to date.

Associated Briefing Notes

BN2 - The Housing Market & Strategic Housing Market Needs Assessment

BN3 - Population & Population Projections

BN4 - Households & Household Projections

BN5 - Jobs, Housing & Economic Growth Projections

BN13 – Housing Mix, Type & Tenure

BN22 – Welfare Reform & its Impact on Housing

BN27 – The Need for Specialist Housing for Older People

BN36 – Communal Establishments for Older People

Further Information

1. Projecting Adult Needs & Service Information (PANSI) - This database is developed by the Institute of Public Care (IPC) and is for use by local authority planners and commissioners of social care provision in England, together with providers. It is a programme designed to help explore the possible impact that demography and certain conditions may have on populations aged 18 to 64 - <http://www.pansi.org.uk/>
2. Projecting Older People Population Information (POPPI) - This database is developed by the Institute of Public Care (IPC) and is for use by local authority planners and commissioners of social care provision in England, together with providers. It is a programme designed to help explore the possible impact that demography and certain conditions may have on populations aged 65 and over <http://www.poppi.org.uk/>
3. Extra Care Housing - means all forms of specialist housing for older people where care services are provided or facilitated. This includes extra care housing, assisted living, very sheltered housing, close care and continuing care environments, and care villages. www.extracarehousing.org.uk
4. Housing with care for older people - is housing with care the way forward for older people? <http://www.jrf.org.uk/work/workarea/housing-with-care-older-people>
5. Housing our Ageing Population: Plan for Implementation (HAPPI2) - The All Party Parliamentary Group (APPG) on Housing and Care for Older People launched an Inquiry in May 2012 to consider progress towards the adoption of the recommendations and the design criteria set out in their previous report, Housing our Ageing Population: Panel for Innovation (HAPPI), published in December 2009. <http://www.housinglin.org.uk/Topics/type/resource/?cid=8650>

ⁱ DCLG (2012) [National Planning Policy Framework](#)

ⁱⁱ DCLG (2011) [Laying the Foundations: a housing strategy for England](#)

ⁱⁱⁱ DCLG (2008) [Delivering Lifetime Homes, Lifetime Neighbourhoods: a national strategy for housing in an ageing society](#)

^{iv} DCLG (2015) Housing – Optional Technical Standards: Accessibility and wheelchair housing standards - <http://planningguidance.communities.gov.uk/blog/guidance/housing-optional-technical-standards/accessibility-and-wheelchair-housing-standards/>

^v Cornwall Council (2012) [Building homes, sustaining jobs and lives: Cornwall's investment plan for housing 2012-2016](#)

^{vi} Cornwall Council (2015) Long Term Accommodation Strategy....

^{vii} Lifetime Homes (2014) [Principles](#)

^{viii} Richard Best & Jeremy Porteus (2013) [Housing our ageing population: plan for implementation \(HAPPI2\)](#)

^{ix} Office for National Statistics (2013) [2011 Census](#)

^x Habinteg Housing Association (2010) Mind the Step: an estimation of housing need among wheelchair users in England

^{xi} Cornwall Council (2015) Lifetime Homes: Wheelchair users

^{xii} Dr Dyfed Wyn Huws (2010) [Cornwall & Isles of Scilly Healthy Weight Strategy 2009-13](#)

^{xiii} Public Health England (2013) Cornwall Health Profile

^{xiv} Jenny Parnell, Hannah Aldridge and Peter Kenway (2012) [Older people's Housing: choice, quality of life, and under occupation](#)

^{xv} Office for National Statistics (2013) [2011 Census](#)

^{xvi} GVA/Edge Analytics (2013) [Strategic Housing Market Needs Assessment Main Report: Plymouth City Council, South Hams District Council, West Devon Borough Council, Cornwall Council and Dartmoor National Park](#)

^{xvii} Oxford Brookes University & Institute of Public Care (July 2014) [Projecting Older People Population Information \(POPPI\)](#)

^{xviii} Oxford Brookes University & Institute of Public Care (July 2014) [Projecting Adult Needs and Service Information \(PANSI\)](#)

^{xix} Public health England (2014) [Health improvement: 2.12 excess weight in adults](#)

^{xx} Shelter (2012) [A better fit? Creating housing choices for an ageing population](#)

^{xxi} 'Lifetime homes' were developed in the 1990s. There are 16 design criteria, based on five principles: inclusivity, accessibility, adaptability, sustainability and good value for money. The aim is to make all new housing suitable for older and disabled people and to make future alterations easier and less costly. This table features seven of the accessibility features that are most relevant to older people.

^{xxii} Shelter (2012) [A better fit? Creating housing choices for an ageing population](#)

^{xxiii} [Initiatives such as Help to Buy, NewBuy Guarantee Scheme, Getting Britain Building, New Homes Bonus, Build to Rent, changes to Permitted Development Rights, streamlining of building regulations and standards, etc](#)

^{xxiv} Housing Lin (2015) Bungalows - <http://www.housinglin.org.uk/Topics/browse/Housing/HousingforOlderPeople/Bungalows/>

^{xxv} Three Dragons (2015) Viability Study – Local Plan Accessibility Standards Additional Testing

^{xxvi} Jenny Parnell, Hannah Aldridge and Peter Kenway (2012) [Older people's Housing: choice, quality of life, and under occupation](#)

^{xxvii} Jenny Parnell, Hannah Aldridge and Peter Kenway (2012) [Older people's Housing: choice, quality of life, and under occupation](#)

^{xxviii} Jenny Parnell, Hannah Aldridge and Peter Kenway (2012) [Older people's Housing: choice, quality of life, and under occupation](#)

^{xxix} Tony Wilson, Gareth Morgan, Afzal Rahman and Lovedeep Vaid (2013) The Local Impacts of Welfare Reform: an assessment of cumulative impacts and mitigation