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Development Policy Manager,
Development Services,
Warwick District Council,
Riverside House,
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Leamington Spa,
CV32 5HQ

24th June 2014

Dear Sirs,

**McCARTHY & STONE RETIREMENT LIFESTYLES LTD.
RESPONSE TO CONSULTATION ON THE WARWICK LOCAL PLAN – PROPOSED SUBMISSION
STRATEGY DOCUMENT**

Thank you for the opportunity to comment on the consultation papers for the aforementioned document. As the market leader in the provision of sheltered housing for sale to the elderly, McCarthy and Stone Retirement Lifestyles Ltd considers that with its extensive experience in providing development of this nature it is well placed to provide informed comments on the Warwick Local Plan – Proposed Submission document insofar as it affects or relates to housing for the elderly.

We have previously provided commentary on the emerging Warwick Draft Local Plan in July 2013. In our representation we stressed the need to consider addressing the current and future housing needs of older people within Warwick District and for the Council to take this opportunity to positively address this issue within the emerging Local Plan.

We would therefore like to commend the Council for taking a positive approach in seeking to provide appropriate accommodation to meet the needs of its ageing population consistently throughout the Local Plan. We note and support the inclusion of wording detailing a requirement for older person's housing in:

- sub-clause b) of *Strategic Policy DS2: Providing the Homes the District Needs*
- sub-clause d) of *Policy H6: Creating Healthy Communities*
- *Policy H5: Specialist Housing for Older People* and the accompanying justification to this policy.

Notwithstanding the above we do have the following comments to make on the proposed Local Plan.

Policy H5: Specialist Housing for Older People

As mentioned previously, McCarthy and Stone welcome the proactive stance the Council has taken in seeking to provide appropriate levels of accommodation to meet the needs of its aging population.

Strategic Housing Market Assessment

We agree with the principle that specialist accommodation for the elderly should make a positive contribution to housing need however the extent of this need should not be determined solely by the Strategic Housing Market Assessment (SHMA). Whilst we agree that the SHMA should be the main point of reference for determining housing need, McCarthy and Stone did raise concerns over the findings of the SHMA in the stakeholder workshop for this event, particularly with regards to the extent of affordable older person's housing required in an area with such a high proportion of owner occupation amongst the over 60's.

In comments submitted to the North Warwickshire Council we pointed out errors arising from the misuse of the Housing LIN SHOP@ tool and ultimately this resulted in substantial changes to the chapter of the SHMA relating to specialist housing. Whilst we are, for the most part, happy with the revised content of the SHMA, McCarthy and Stone did offer more comprehensive data to feed into the SHMA which was ultimately rejected by the Council(s) in favour of greater expediency.

To reiterate, we are happy with the broad findings of the SHMA, but feel it has limitations particularly when determining the extent of owner occupied older person's accommodation. It should not be used as the sole method for determining need on this basis and if an applicant is able to provide more up-to-date data then we feel that this should be given sufficient weighting when determining an application. Numerous publicly available tools for older person's housing, such as the aforementioned SHOP@ tool are available.

Primary Health Care Trust

We are also concerned on the extent of the influence consultation with a Primary Health Care Trust will have in determining applications for older person's accommodation. McCarthy and Stone support the requirement for specialist accommodation for the elderly to be located close to health care facilities which is a key requirement for the Company when selecting sites to develop.

In our experience when a Council consults with a local GP or Primary Health Care Trust it is inevitably used as an opportunity to highlight a shortfall in funding or resources, with little practical consideration to the benefits of a scheme.

We acknowledge that older people account for 55% of GP appointments, 68% of outpatient appointments and 77% of inpatient bed stays. Health and social care provision can be streamlined within specialist housing as most residents from such scheme will come from within the PCT catchment area. Visiting health professionals including doctors, nurses, chiropodists and so on can visit several residents during one visit, which is a more efficient use of public resources. The Institute of Public Care recently published a report estimated that the lower number of GP visits results in a reduction in costs to the NHS £1,419 per annum. A copy of this report has been appended for your convenience.

There is also a wider ethical question as to why an older person's choice of home should be constrained by funding to health system they have contributed to throughout their working lives.

Again, we are not against the prospect of meaningful, constructive engagement with Primary Health Care Trust provided there is a balanced view taken when providing feedback.

Thank you for the opportunity for comment.

Yours sincerely,

A handwritten signature in blue ink, appearing to read 'Ziyad Thomas', with a stylized flourish at the end.

Ziyad Thomas
Policy Planner
The Planning Bureau Ltd.