

**Planning Appeal Ref: APP/W0530/W/21/3280395**

**November 2021**

**Land Between Haverhill Road and Hinton Way,  
Stapleford, Cambridge**

**Planning need for C2 retirement care village  
Proof of Evidence**

**SUMMARY**

**Jessamy Venables BSc(Hons) MSc MRICS**

## **1. Introduction**

- 1.1. My name is Jessamy Venables BSc (Hons) MSc MRICS, Director at Carterwood, specialist advisers dedicated to the care home, older people's housing and care village sectors.

## **2. Scope of Evidence**

- 2.1. My evidence relates to the need for the appeal scheme, providing an update to the Planning Need Assessment (PNA), which identified an existing and increasing need for private extra care and market standard care home beds in the South Cambridgeshire District Council (SCDC) area and the market catchment.

## **3. The appeal scheme**

- 3.1. Care villages provide a variety of accommodation, care and communal facilities within one development, allowing potential residents to 'right-size' from their previous home to a purpose-designed community, assured that should their care and dependency needs change, their home does not. Inclusion of a care home ensures that should needs progress to 24-hour nursing or dedicated dementia care, this does not necessitate a move from the care village.
- 3.2. Disaggregation of the various elements would reduce the scale of the core facilities, amenities and care provision on-site and not create an effective care community.

## **4. National context**

- 4.1. PPG states a 'critical' need to provide specialist housing for older people, based on the projected significant elderly demographic increase.
- 4.2. NPPF advises that local planning authorities should assess the size, type and tenure of housing needed to ensure there is a variety of provision to enable all older people to remain living independently for as long as they are able, with suitable options for 24-hour care when necessary.
- 4.3. When a care need arises, an older person cannot usually wait for appropriate accommodation and care; if the supply is not available, local residents may need to move away from family, friends and community.

---

Private extra care

- 4.4. Private extra care housing enables residents to live as independently as possible within their own homes, crucially with the 24-hour on-site care and support available.
- 4.5. Private extra care supply generally lags behind affordable provision; in the SCDC area, there are currently just 95 units (31 per cent of total) when over 71 per cent of older person households in the SCDC area are owned outright.
- 4.6. During the pandemic, specialist retirement housing kept many older people safe compared to those living in a community setting.

Care homes

- 4.7. There remains a significant and increasing need for care homes, particularly nursing and dedicated dementia care. While the pandemic caused a short-term reduction in demand it is expected occupancy will return to pre-pandemic levels by 2023.
- 4.8. I consider the impact likely to result in the closure of care homes lacking the quality of accommodation or economies of scale required to provide high level nursing and dementia care.

**5. Need assessment for private extra care**

- 5.1. The need assessment for private extra care is updated (4 October 2021) to reflect changes in existing and proposed supply, based on 2024, the earliest the scheme could be made available, across a 10-mile market catchment and the SCDC area, and utilising the prevalence rates for older people aged over 75 years applied previously.
- 5.2. My analysis, assuming all planned units (both granted and pending) are developed and operational, indicates a net need for 331 private extra care units within the market catchment and 373 within the SCDC area. If none of the proposed schemes are completed by 2024, net need increases to 985 and 608 private extra care units respectively, in both areas.
- 5.3. I consider it is highly unlikely that all planned units will be developed over this timescale and have estimated the earliest potential completion for each. My more realistic assessment suggests an unmet need for 838 and 533 private extra care units in the market catchment and SCDC area, respectively, by 2024.

---

## **6. Need assessment for care home**

- 6.1. The need assessment for care home beds is updated (4 October 2021) using the same methodology for the 5-mile market catchment and SCDC local authority area, based on 2024.
- 6.2. I have analysed each planned scheme in terms of likely delivery timescales. On this basis, there is an indicative shortfall of 118 market standard beds in the market catchment and 31 in the SCDC area, as at 2024.
- 6.3. In the PNA, a 'market standard' bedroom is defined as providing a minimum of an en-suite with WC and wash hand basin. The importance of bathing and delivering personal care within a resident's room has become an essential component of infection control during the pandemic, leading to an increased need for bedrooms providing wetroom en-suites. Net need based on existing and proposed provision providing en-suite wetroom bedrooms increases to 358 and 298 bedrooms, based on 2024.
- 6.4. For dedicated dementia provision, the updated analysis shows a significant need for 177 and 111 market standard dedicated dementia beds within the market catchment and SCDC area, respectively, if all planned units are developed and available by the date of assessment. This increases to 176 market standard care beds in the SCDC area if the likely availability of planned schemes is considered.
- 6.5. The above does not take account of any potential closures of existing supply.

## **7. Cambridgeshire Adult Social Care and SCDC review**

- 7.1. Cambridgeshire Adult Social Care identifies a shortage of residential dementia, nursing and nursing dementia provision as key pressures in South Cambridgeshire.
- 7.2. The *Housing Needs of Specific Groups - Cambridgeshire and West Suffolk* provides projections of additional specialist housing required by older people in the SCDC area.
- 7.3. The current shortfall (based on 2020) is 239 units of leasehold housing with care based on existing supply of 94 units and is expected to increase to 473 units by 2040, assuming no change in existing supply.

---

7.4. A shortfall of 642 care bedrooms is identified based on an existing supply of 742 beds in 2020, projected to increase to a shortfall of 1,613 care beds by 2040 assuming no change in existing supply.

## **8. Benefits to residents and the local community**

8.1. A care village offers the unique combination of maintaining independence while enjoying a better quality of life within a socially active and supportive environment with comprehensive facilities, activities and care services.

8.2. Benefits include:

- i) Personal health, psychological and social wellbeing improvements
- ii) Reduced reliance on and costs for the NHS;
- iii) Assisting families striving to provide sufficient care and support
- iv) The release of under-occupied family homes back to the housing market

8.3. The availability of accessible housing options encourages ‘right-sizing’, improves quality of life and releases family homes to the market

## **9. Conclusion**

9.1. PPG advises that where there is an identified unmet need for specialist housing, local authorities should take a positive approach to schemes that propose to address the need.

9.2. My revised analysis indicates shortfalls of **838** private extra care units in the market catchment and **533** in the SCDC area in 2024.

9.3. A net need for **118** market standard elderly care home beds in the market catchment and **31** in the SCDC area in 2024 is indicated, increasing to **358** and **298** bedspaces in the respective catchments, if based on full en-suite wetroom bedrooms. Accommodation quality is increasingly important to enable care within a COVID-compliant environment.

9.4. My analysis of need for dedicated dementia care beds, indicates a net need for **177** market standard beds in the market catchment and **176** in the SCDC area based on 2024.

- 
- 9.5. The *Housing Needs of Specific Groups* report identifies a current (2020) shortfall of **239** leasehold (private) extra care units in the SCDC area, expected to increase to a shortfall of 473 extra care units by 2040.
- 9.6. It identifies a current (2020) need for **642** care beds in the SCDC area, expected to increase to 1,613 by 2040, although suggests some need could be met through the development of additional extra care provision.
- 9.7. Whilst the shortfalls discussed vary due to the use of different toolkits, it is clear from both analyses, that the current undersupply of specialist housing for older people is significant and needs urgent attention.
- 9.8. I consider it is inappropriate to wait for the plan-making process to deliver the current shortfall as The Greater Cambridge Local Plan is some years away. Any greenfield sites within the Green Belt coming forward for C2 development would be unlikely to be completed prior to 2025. Older people in need of care cannot afford to wait until appropriate levels of provision become available.
- 9.9. There are currently just 241 private extra care units in the market catchment and 95 in the SCDC area. Expeditious development of additional provision is necessary to meet the existing substantial shortfall and address the rapidly increasing requirement.
- 9.10. All parties consider there is an identified need for specialist older people's housing in the SCDC area. The appeal scheme's contribution towards meeting this need would be very significant.