

Older Persons Housing Proof of Evidence Appendices of Iain Warner BSc (Hons) DipTP MRTPI

Town and Country Planning Act 1990 Planning and Compulsory Purchase Act 2004

Section 78 Appeal

Former Laporte Works Site, Nutfield Road, Nutfield

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Appendix IW1

Elderly Persons Needs Assessment

ELDERLY PERSONS NEEDS ASSESSMENT



ELDERLY PERSONS NEEDS ASSESSMENT

Appeal against refusal of Outline planning permission for the development of the site for new homes (Use Class C3) and Integrated Retirement Community (Use Classes C2, E(e), F2), creation of new access, landscaping and associated works to facilitate the development, in phases which are severable (Outline with all matters reserved, except for Access)

Former Laporte Works Site, Nutfield Road, Nutfield
Nutfield Park Developments Limited (LTD)

January 2026

PINS REF: APP/M3645/W/25/3374913

LPA REF: TA/2023/1281

OUR REF: 1202.02.RPT

TETLOW KING PLANNING
FIRST FLOOR, 32 HIGH STREET, WEST MALLING, KENT ME19 6QR
Tel: 01732 870988 Email: info@tetlow-king.co.uk

www.tetlow-king.co.uk

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Introduction

Section 1

- 1.1 This report has been prepared by Tetlow King Planning on behalf of Nutfield Park Developments Limited (Ltd) in support of their appeal.
- 1.2 This report assesses the local need for specialist accommodation for older people within Tandridge now and up to 2045, whilst also providing a focus on the immediate level of need between 2025 and 2029.
- 1.3 This Statement includes an assessment of Development Plan policies and other material considerations that are relevant to the site, the proposed development and the provision of specialist accommodation for older people.
- 1.4 The ageing population prompts a housing response to meet this growing need. Whilst housing and care provision has increased significantly in the UK over the past few years, it is still not keeping up with demand from the growing ageing population.
- 1.5 This assessment sets out the findings of an Elderly Persons needs assessment for older people within the local authority administrative area of Tandridge.
- 1.6 The report comprises 9 sections as follows:
 - Section 2 – Planning Policy Context;
 - Section 3 – Forms of Specialist Housing;
 - Section 4 – Local Assessment;
 - Section 5 – Review of Methodologies;
 - Section 6 – Needs Assessment to 2045;
 - Section 7 – Needs Assessment to 2029;
 - Section 8 – Alternative Growth Scenarios; and
 - Section 9 – Summary and Conclusions.
- 1.7 The assessment draws on a range of national and local publications as well as information on the local provision of specialist older persons accommodation schemes.

Planning Policy Context

Section 2

Introduction

- 2.1 This section of the assessment provides a brief overview of the relevant development plan policies and national approach relating to the delivery of specialist older persons accommodation across Tandridge and at a national level.
- 2.2 The Development Plan for the area comprises Tandridge District Council Core Strategy [CD4.1], adopted in October 2008 and Tandridge Local Plan Part 2 – Detailed Policies, adopted July 2014 [CD4.2].
- 2.3 Other material considerations relevant to this application include the National Planning Policy Framework (December 2024) [CD5.1], the Planning Practice Guidance (ongoing updates) [CD5.18], and a number of corporate documents.

The Development Plan

Tandridge District Core Strategy (2008) [CD4.1]

- 2.4 The Core Strategy sets out the Council’s strategic policies and proposals for the development and use of land within the District.
- 2.5 Policy CSP8 sets out the council’s approach to the provision of extra care housing. This policy set out a need to provide for at least 162 units of Extra Care accommodation within the District by 2016 with an updated assessment to determine the need for 2017 to 2026.
- 2.6 The only reference to care homes is linked to the provision of extra care housing and notes that regard will be had to:

“The potential to co-locate a nursing/ residential care home on the site where there is an acknowledged need.”

- 2.7 The strategy is therefore silent in regard to any detailed policy seeking to deliver new care homes within Tandridge.

Tandridge Local Plan Part 2 (2014) [CD4.2]

- 2.8 The Part 2: Detailed Policies plan sets out the policies that will be used in the determination of all planning applications in the endeavour of working towards

achieving sustainable development. The adoption of the Part 2 plan superseded all of the remaining saved policies of the Local Plan from 2001.

- 2.9 The Part 2 plan contains no relevant policies relating to the provision of specialist accommodation for older people.

Material Considerations

Withdrawn Tandridge Local Plan

- 2.10 The Local Plan 2023 set out the strategic framework for development up to 2033. Within the draft plan it set out an updated approach to delivering specialist housing for older people through draft policy TLP14. This policy has regard to both SHMAs (the 2015 and 2018 update) as well as a Tandridge District Housing Strategy from 2018 (the updated document is discussed below).
- 2.11 The Local Plan 2023 was found unsound in the Planning Inspectors report [CDx.x], that being dated 14 February 2024, and was subsequently formally withdrawn on 18 April 2024 by the Full Council of Tandridge. Accordingly, the plan is of no relevance to this assessment, nor is any formal evidence prepared in support.
- 2.12 Following the withdrawal of the Local Plan 2023, it was agreed at a Full Council meeting on 18 April 2024 that TDC would start working on a new Local Plan. The published Local Development Scheme (June 2024) indicated that the new Local Plan will not be submitted for Examination until at least late 2026 or early 2027, demonstrating that it will be a number of years before a new Local Plan is adopted as part of TDC's Development Plan.

Material Considerations

National Planning Policy Framework [CD5.1]

- 2.13 In December 2024 the Government published the revised the National Planning Policy Framework (hereafter referenced as “NPPF”). The NPPF is a material consideration in the determination of planning applications and appeals.
- 2.14 Paragraph 61 of the revised NPPF establishes that:

"to support the Government's objective of significantly boosting the supply of homes, it is important that a sufficient amount and variety of land can come forward where it is needed, that the needs of groups with specific housing requirements are addressed and that land with permission is developed without unnecessary delay" [my emphasis added].

2.15 The revised NPPF retains the commitment to plan for and assess the housing needs of older people. Within the context of 'delivering a sufficient supply of homes' Paragraph 63 of the revised NPPF establishes that the size, type and tenure of housing needed for different groups in the community, including older people (as defined in Annex 2) and people with disabilities, should be assessed. The update now specifically defines older people as including:

“retirement housing, housing-with-care and care homes.”

2.16 Paragraph 71 also notes that:

“Mixed tenure sites can provide a range of benefits, including creating diverse communities and supporting timely build out rates, and local planning authorities should support their development through their policies and decisions (although this should not preclude schemes that are mainly, or entirely, for Social Rent or other affordable housing tenures from being supported). Mixed tenure sites can include a mixture of ownership and rental tenures, including Social Rent, other rented affordable housing and build to rent, as well as housing designed for specific groups such as older people’s housing and student accommodation, and plots sold for custom or self-build.” [my emphasis added]

National Planning Practice Guidance [CD5.18]

2.17 The Government also published the National Planning Practice Guidance (hereafter referenced as “PPG”) in March 2014, and it has been subsequently updated, the most recent updates being July 2019. It provides further guidance on the interpretation and application of the NPPF. The elements of the PPG of particular relevance are detailed below.

2.18 As of June 2019, the government introduced a new section of the PPG entitled 'Housing for older and disabled people.' This new section in part reinforces earlier messages within the PPG, whilst in other places it takes the guidance further. It sets out from the opening that:

“The need to provide housing for older people is critical. People are living longer lives and the proportion of older people in the population is increasing. In mid-2016 there were 1.6 million people aged 85 and over; by mid-2041 this is projected to double to 3.2 million. Offering older people a better choice of accommodation to suit their changing needs can help them live independently for longer, feel more connected to their communities and help reduce costs to the social care and health systems. Therefore, an understanding of how the ageing population affects

housing needs is something to be considered from the early stages of plan-making through to decision-taking.” (Paragraph: 001 Reference ID: 63-001-20190626) [my emphasis added].

2.19 The guidance sets out clearly that:

“The health and lifestyles of older people will differ greatly, as will their housing needs, which can range from accessible and adaptable general needs housing to specialist housing with high levels of care and support. For plan-making purposes, strategic policy-making authorities will need to determine the needs of people who will be approaching or reaching retirement over the plan period, as well as the existing population of older people.” (Paragraph: 003 Reference ID: 63-003-20190626) [my emphasis added].

2.20 In order to determine the levels of need, the guidance sets out that:

“The age profile of the population can be drawn from Census data. Projections of population and households by age group can also be used. The future need for specialist accommodation for older people broken down by tenure and type (e.g., sheltered housing, extra care) may need to be assessed and can be obtained from a number of online tool kits provided by the sector, for example SHOP@ (Strategic Housing for Older People Analysis Tool), which is a tool for forecasting the housing and care needs of older people. Evidence from Joint Strategic Needs Assessments prepared by Health and Wellbeing Boards can also be useful.” (Paragraph: 004 Reference ID: 63-004-20190626).

2.21 When considering the task of addressing the specific needs within plans, the guidance states:

“Plan-making authorities should set clear policies to address the housing needs of groups with particular needs such as older and disabled people. These policies can set out how the plan-making authority will consider proposals for the different types of housing that these groups are likely to require. They could also provide indicative figures or a range for the number of units of specialist housing for older people needed across the plan area throughout the plan period.” (Paragraph: 006 Reference ID: 63-006-20190626).

2.22 This section also provides guidance on the specific types of specialist forms of older persons housing that exist, which are:

“Age-restricted general market housing: This type of housing is generally for people aged 55 and over and the active elderly. It may include some shared amenities such as communal gardens but does not include support or care services.

Retirement living or sheltered housing: This usually consists of purpose-built flats or bungalows with limited communal facilities such as a lounge, laundry room and guest room. It does not generally provide care services but provides some support to enable residents to live independently. This can include 24 hour on-site assistance (alarm) and a warden or house manager.

Extra care housing or housing-with-care: This usually consists of purpose-built or adapted flats or bungalows with a medium to high level of care available if required, through an onsite care agency registered through the Care Quality Commission (CQC). Residents are able to live independently with 24 hour access to support services and staff, and meals are also available. There are often extensive communal areas, such as space to socialise or a wellbeing centre. In some cases, these developments are known as retirement communities or villages - the intention is for residents to benefit from varying levels of care as time progresses.

Residential care homes and nursing homes: These have individual rooms within a residential building and provide a high level of care meeting all activities of daily living. They do not usually include support services for independent living. This type of housing can also include dementia care homes.” (Paragraph: 010 Reference ID: 63-010-20190626).

2.23 The section goes on to state that:

“Plans need to provide for specialist housing for older people where a need exists. Innovative and diverse housing models will need to be considered where appropriate.

Many older people may not want or need specialist accommodation or ...

Plan-makers will therefore need to identify the role that general housing may play as part of their assessment. 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.” (Paragraph: 012 Reference ID: 63-012-20190626).

2.24 In respect of decision making the guidance sets out clearly that:

“Where there is an identified unmet need for specialist housing, local authorities should take a positive approach to schemes that propose to address this need”.

(Paragraph: 016 Reference ID: 63-016-20190626).

Our Future Homes: Housing that promotes wellbeing and community for an ageing population [CD6.38]

2.25 Although not planning policy guidance in the same way as the NPPF or PPG, this report from the Older People’ Housing Taskforce (hereafter referenced as “**OPTH**”) provides the most up-to-date macro position in relation to future policy when read alongside the Written Ministerial Statement (26 November) by Matthew Pennycook, Minister of State for Housing and Planning [CD5.3].

2.26 The report itself sets out the need to amend the current planning policy framework to ensure that the sector can increase scale/output at pace to meet the needs of the ageing population. It notes in the executive summary that:

“[A]s our population ages, we need to expand these housing options – not just in variety, but in volume as well. Put simply, we need to offer senior citizens greater choice, particularly as their lifestyle and health needs evolve in later life. Ensuring suitable, accessible and affordable housing for later living is a societal obligation on which the current housing market falls significantly short.”

2.27 It then continues at page 8 stating:

“[W]e need to expand the market for the different models of OPH/LLH – incentivising greater investment to drive the development of new supply that is more affordable to the ‘lower to middle-affluence market’, both to buy, and importantly, to live in. We need to couple this with increased consumer awareness, confidence and demand for this housing, across all tenures.

But focussing on specialised OPH/LLH alone is not sufficient. We also need to ensure that mainstream housing better supports senior citizens to live well. We must focus on new build housing, but critically we must focus also on our existing housing stock.”

2.28 The report considers the case for new definitions to cover all forms of older persons housing (what it terms Later Living Homes), which are:

- *Mainstream homes/housing (e.g., existing, new build and adapted homes, rightsizing homes, bungalows, stacked bungalows with lift.);*
- *Community-led homes/ housing (e.g., Alms houses, Co-housing, collaborative housing, Shared Lives, home share.);*
- *Service-led homes/housing with support Supported living (e.g., sheltered homes, independent living or retirement apartments and sometimes bungalows.);*
- *Service-led homes/housing with care Assisted living (e.g., extra care, assisted living, integrated retirement communities, retirement villages.); and*
- *Care homes (e.g., residential and nursing homes.)*

2.29 The WMS specifically notes:

“There is rightly significant national interest in the Taskforce’s findings.”

2.30 It then continues:

“The Government recognises the importance of increased supply and improving the housing options for older people in later life, and we will give careful consideration to the many recommendations set out in the report.”

2.31 It concludes on the lines of:

“The Government is committed to helping older people to live comfortably and independently at home for as long as possible.”

Forms of Specialist Housing

Section 3

3.1 The Planning Practice Guidance provides a useful summary of the main types of specialist housing for older people as referenced above, this has been graphically represented best by Associated Retirement Community Operators (hereafter referenced as “ARCO”)¹ in the image below:

 Retirement Housing Also known as: • Sheltered housing • Retirement flats or communities	 Integrated Retirement Communities Also known as: • Extra care • Retirement villages • Housing-with-Care • Assisted living • Independent living	 Care Homes Also known as: • Nursing Homes • Residential Homes • Old People's Home
 Offers self-contained homes for sale, shared-ownership or rent	 Offers self-contained homes for sale, shared-ownership or rent	 Communal residential living with residents occupying individual rooms, often with an en-suite bathroom
 Part-time warden and emergency call systems. Typically no meals provided	 • 24-hour onsite staff • Optional care or domiciliary services available • Restaurant / Cafe available for meals	 24-hour care and support. Meals included
 Typical facilities available: • Communal lounge • Laundry facilities • Gardens • Guest room	 Typical facilities available: • Restaurant and Café • Leisure Club including: gym, swimming pool, exercise class programme • Communal lounge and/or Library • Hairdressers • Gardens • Guest room • Activity (Hobby) rooms • Social event programme	 Typical facilities available: • Communal lounge • Laundry facilities • Gardens • Guest room
 Typically 40 - 60 homes	 Typically 60 - 250 homes	 Sizes vary considerably

3.2 This assessment focusses on both the extra care and care homes typologies but excludes any assessment of retirement housing. Whilst noting that the quantum of extra care proposed as part of the appeal proposals is smaller than the typical size of an Integrated Retirement Community as set out above that is because it considers

¹ <https://www.arcouk.org/>

standalone schemes only and not where they are provided in conjunction with a care home as per the appeal proposals.

- 3.3 The difference between personal care provision and nursing provision is that a nursing home has a qualified nurse on site to provide medical care and is registered with the CQC accordingly, personal care provision does not provide that level of medical care.

Local Assessment

Section 4

4.1 This section assesses the evidence base prepared for the council in terms of local housing needs assessments.

4.2 A series of relevant local factors are included at [Appendix 1](#) of this assessment obtained from POPPI (Projecting Older People Population Information).

Planning guidance for accommodation with care for older people (October 2025)
[CD6.8]

4.3 This document published by Surrey County Council considered the current and future needs for specialist housing for older people.

4.4 In addressing extra care provision, it provides a series of detailed guidance to assess whether schemes are providing extra care accommodation and/or C2 in their nature. Of particular relevance to this case and the Council's approach is what is set out in relation to 'Close care settings', where the guidance notes:

“Close care settings are generally larger developments than those seen for individual extra care settings or care homes, and are recognisable by being comprised of specialist housing for older people with an adjacent residential or nursing care home.

These settings, due to the proximity of a care home, can have the potential to offer specialist housing residents additional care and support which is beyond sheltered housing models, as the facilities and staff support may be made available to them. However, any planning proposals arguing for C2 planning classification of the housing provision, due to the proximity of care home provision, should be very clear in setting out how there is an inseparable link between the two elements, such that they can be treated together as one overarching residential institution.”

4.5 In relation to care home provision it notes:

- *“There is no single, recognised methodology for identifying future residential and nursing care need...*
- *More granular assessments for future need on the basis of market “standard” accommodation (e.g. ensuite bathrooms) cannot prove that a new care home is*

absolutely necessary where the existing market is able to renovate or replace properties in response to market forces...

- *For residential care homes only, reduces the 2030 and 2035 need figures of Surrey’s Borough and District areas as a result of the delivery of new affordable extra care housing. This is because Surrey County Council’s focus will be on identifying and supporting older people who would benefit from affordable extra care through nominations processes to eliminate a need for future residential care as much as possible.”*

4.6 It is noted that in the introduction to the document it notes:

“For specialist housing for older people, Surrey County Council recognises that the biggest gap in provision is in affordable extra care housing. In response to this, the Right Homes Right Support Strategy has a target of achieving 725 additional affordable extra care housing units by the end of the decade. It is within this context that Surrey County Council presents its wider consideration of the future need for affordable extra care housing, alongside other market-facing models of housing with care for older people.”

4.7 This provides the context to the guidance and the individual district profiles, that being the County Council’s primary aim of increasing its supply of affordable extra care to meet its obligations through the adult social care remit.

Planning profile for accommodation with care for older people – Tandridge (October 2025) [CD6.9]

4.8 In support of the accommodation strategy the County Council also provided district profiles to identify future needs.

4.9 In respect of the future needs for extra care accommodation, it noted as below:

Year	Affordable Projected (oversupply)/ need for additional units	Market Projected (oversupply)/ need for additional units	Total Projected oversupply)/ need for additional units
2025	104	213	317
2030	112	242	354
2035	121	273	394

4.10 The supporting text specifically noted as follows:

“As stated in the Planning Guidance for Accommodation with Care for Older People, Surrey County Council’s Right Homes Right Support Strategy is highly

ambitious in increasing the availability of affordable extra care housing. In consideration of this strategic shift the affordable need figures should be regarded as conservative.”

4.11 That profile noted the following for residential care as of October 2025:

- *“The Tandridge District area had a supply of 319 residential care home beds against a 75+ population of 10,380. This provides a prevalence rate of 30.73 beds per 1,000 of the 75+ population.*
- *In comparison, England had a supply of 204,293 residential care home beds against a 75+ population of 5,573,642. This provides a prevalence rate of 36.65 beds per 1,000 of the 75+ population.”*

4.12 The assessment considered the implications for 2030 and 2305 as below:

Year	Tandridge 75+ population	No. of beds to reflect England ratio in 2025	Reduction due to delivery of new affordable extra care housing	Projected (oversupply) / need for additional beds in Tandridge
2030	11,214	411	(35)	57
2035	12,095	443	(35)	89

4.13 The same profile also looked at nursing care provision and noted:

- *“The Tandridge District area had a supply of 609 nursing care home beds against a 75+ population of 10,380. This provides a prevalence rate of 58.67 beds per 1,000 of the 75+ population.*
- *In comparison, England had a supply of 212,440 nursing care home beds against a 75+ population of 5,573,643. This provides a prevalence rate of 38.12 beds per 1,000 of the 75+ population.”*

4.14 The assessment considered the implications for 2030 and 2035 as below:

Year	Tandridge 75+ population	No. of beds to reflect England ratio in 2025	Projected (oversupply) / need for additional beds in Tandridge
2030	11,214	427	(182)
2035	12,095	461	(148)

**Older People’s Residential and Nursing Care Market Positioning Statement:
Update October 2024 [CD6.10]**

4.15 This update was produced with the main aim to:

“encourage commissioners, people who use services, carers and provider organisations to work together to explain what residential care (with or without nursing) is needed in each area and why.”

4.16 The identified key objectives of the statement were to:

- *“Ensure there is the right care home provision available for the changing needs of the increasing population.*
- *Increase the capacity for ASC-funded placements in the residential and nursing care market, including for complex mental health needs and complex physical frailty.*
- *Secure strong relationships with care home providers and identify strategic partners to shape the social care market.*
- *Gain a comprehensive picture of what people want their residential and nursing care provision to be in the future by working with residents, carers, families, and providers.*
- *Improve our offer of support to providers to improve quality and outcomes for all residents receiving care.*
- *Ensure there are open and transparent processes and communication channels in place to enable residents to make well-informed choices about their care, understand how to manage their finances and know what to expect if their capital runs out.*
- *To identify gaps in provision and how these can be addressed through innovation and differing approaches to commissioning care.”*

4.17 The statement then considered requirements for each individual local authority, with the relevant information for Tandridge noting as follows:

Localities in East Surrey	Service Category	No. of ASC Service Users in January 2024 (Actuals)	No of ASC Service Users in January 2030 (Forecast)
Tandridge	Residential	27	7
Tandridge	Residential Enhanced	72	83
Tandridge	Nursing	101	109

4.18 It is to be noted that the figures relate only to those being provided care beds as part of the Adult Social Care element and does not reflect private paying users.

Surrey County Council Commission Statement (2019) [CD6.11]

4.19 This statement relating to accommodation with care, residential and nursing care for older people was prepared by Surrey County Council for Tandridge District Council for April 2019 onwards. It sets out the needs for the next 20 years:

“for all accommodation based services we commission and provide for residents of Surrey...”

4.20 Addressing the scope of the document it is noted that it states:

“This document sets out Surrey County Council’s expectations for the market to respond to the Accommodation with Care & Support Strategy in terms of older people’s services within the Tandridge District Council area.”

4.21 When addressing the matter of extra care housing the statement states that:

“Of the specialised housing options on page 3, Extra care is regarded by Surrey County Council as being in greatest shortage. The Accommodation with Care & Support Strategy aims to address this shortage, because the increasing availability of attractive extra care options will reduce the likelihood of older people moving directly into a care home as their care needs increase. This is because extra care gives older people the opportunity to live in settings which are designed with increasing needs in mind, with shared facilities which encourage community living, and with care and support readily available should they need it.”

4.22 The statement considers the current and future requirements for care home beds within Tandridge over the plan period as reproduced below:

	Care Home	Nursing Care
1 April 2019 No. of care home beds	388	666
75+ pop. (2019)	8,800	8,800
Beds per 1,000 75+ pop. (2019)	44.09	75.68
75+ pop. (2025)	11,000	11,000
Beds per 1,000 75+ pop. (2025)	35.27	60.55
No. beds to reflect England 2019 ratio (2025)	485	507
Reduction due to rental extra care (2025)	74	
2025 indicated demand	23	-159
75+ pop. (2035)	13,500	13,500
Beds per 1,000 75+ pop. (2035)	28.74	49.33
No. beds to reflect England 2019 ratio (2035)	595	623
Reduction due to rental extra care (2035)	91	
2035 indicated demand	116	-43

- 4.23 The statement provides a link with the provision of more extra care housing and a corresponding reduction in the provision of care home beds due to the improved accommodation choice for residents.

Addressing the Needs of All Household Types (June 2018) [CD6.16]

- 4.24 This technical paper prepared by Turley on behalf of the council formed part of the evidence base to the withdrawn Local Plan 2023 and was an update to the earlier main report from 2015.

- 4.25 It was the 2015 report that identified the projected need for specialist housing for older people stating at paragraph 4.9 that:

“over the plan period – from 2013 to 2033 – an additional 9,825 older residents aged 65 and over are projected to live in Tandridge in 2033, relative to 2013. This represents a 59% increase in the older population, although it is notable that the number of residents aged 85 and over will see a greater proportionate increase, growing by 136%.”

- 4.26 The paper then continues to show in figure 4.3 that over the plan period there is a recognised need for 146 units of extra care accommodation, together with the other acknowledged need for specialist housing accommodation.

Figure 4.3: Projected Need for Specialist Housing 2013 – 2033

	Change 2013 – 2033
Projected change in population aged 75+	5,846
Sheltered housing – 125 units per 1,000 75+	731
Enhanced sheltered housing – 20 per 1,000 75+	117
Extra care with 24/7 support – 25 per 1,000 75+	146
Total specialist housing need (units)	994
Specialist housing need per annum	50

- 4.27 Importantly, the paper notes that the growth for care home accommodation is expressed outside of this modelling. That future growth was set out separately at figure 4.4 reproduced below.

Figure 4.4: Modelled change in communal population 2013-2033

	2013	2033	Change	% Change
Under 74	1,351	1,351	0	0
75-84	265	433	169	64%
85+	495	933	438	89%
Total	2,111	2,717	607	29%

- 4.28 The paper goes on to note at paragraph 4.19 that:

“The overall increase of 607 in the communal population relates to individual persons, indicating that there will be an increased need for bedspaces in

communal establishments in Tandridge over the plan period. There is no specific methodology for translating this growth into dwellings or establishments, however, and this will therefore need to be considered in the context of individual care home proposals.”

Local Provision

- 4.29 Home ownership data for Tandridge for those aged 65 and over provided by POPPI indicates the following:

Table 4.1: Percentage of Population Aged 65 Plus, by Tenure for Tandridge

	People Aged 65-74	People Aged 75-84	People Aged 85+
Owned	85.20%	85.57%	75.28%
Rented from Council or other social rented	8.79%	7.56%	6.33%
Private Rented or Living Rent Free	5.10%	4.28%	4.28%

(Source: POPPI)

Supply of Extra Care Accommodation

- 4.30 At present across Tandridge the provision of specialist extra care accommodation is summarised in table 4.2, with the full list of relevant schemes included at [Appendix 2](#). This list includes those schemes operating under the definition of close.

Table 4.2: Indicative Levels of Close Care and Extra Care Housing for Tandridge.

	Number of Units/ Places	Current Provision Per 1,000 of Aged 75 Years and Over 10,300) ²	Housing in Later Life Benchmarks	Increase in Units Required to Meet Housing in Later Life Benchmarks (2025)
Extra Care Housing to rent ³	78 ⁴	7.57	15	+69
Extra Care Housing for leasehold	240 ⁵	23.3	30	+76.5

(Source: <http://www.eac.org.uk> and *Housing in Later Life*)

- 4.31 Table 4.2 also includes the benchmark rates of provision set out within Housing in Later Life for extra care housing, alongside an estimate of existing under provision. In summary it is clear that at the present time the provision of extra care for rent outstrips the demand whilst that provision for leasehold falls short of current demand.
- 4.32 Across the 5 schemes listed as providing either close care or extra care accommodation (3 schemes are listed as being close care, 2 listed as extra care) there

² This figure is taken from table 6.1 below.

³ This includes those units provided under license.

⁴ This includes a total of 45 units from a scheme that has yet to be provided at Orchard Court

⁵ This figure includes the 152 units to be delivered by Audley which are not yet provided.

are a total of 78 units in the social rental sector or licensed, the remaining 240 units operate within the private sector.

- 4.33 It is to be noted that 45 of the units within the social provision are yet to be constructed as they relate to a site under the control of Surrey County Council which would see a care home site redeveloped to deliver extra care housing in its place. This scheme presently only has outline approval and was identified in the application papers as providing up to 54 units.
- 4.34 It should be noted of those 240 units a total of 152 beds at present are not operational as this relates to a recent approval for Audley Retirement Villages. In addition, the supply notes Charters Village as providing a total of 88 units, however the scheme only provides 83 extra care units in accordance with the approved plans.
- 4.35 Whilst the indicated provision therefore totals 318 units, as of the time of this assessment only 116 units actually exist. The corrected provision is therefore set out in table 4.3 below and it is these figures that are relied upon in regards current provision. The Audley scheme has been included given that it has full permission and conditions have been discharged to ensure that the site can proceed swiftly. However, given that at present the Orchard Court site only has outline consent there is no certainty of it being delivered at present.

Table 4.3: Corrected Levels of Close Care and Extra Care Housing for Tandridge (2025).

	Number of Units/ Places	Current Provision Per 1,000 of Aged 75 Years and Over 10,300) ⁶	Housing in Later Life Benchmarks	Increase in Units Required to Meet Housing in Later Life Benchmarks (2025)
Extra Care Housing to rent ⁷	37	3.6	15	+117.5
Extra Care Housing for leasehold	235	22.8	30	+74

(Source: <http://www.eac.org.uk> and *Housing in Later Life*)

- 4.36 It is also relevant to note that there is a further live planning appeal for additional extra care provision in the form of 107 extra care units (ref: APP/M3645/W/25/3371917). Given that there is no decision on that appeal (the hearing was due to open 6 January 2026 but was postponed) we have not included these units in the pipeline supply as the planning status is unknown at the time of finalising this assessment.

⁶ This figure is taken from table 6.1 below.

⁷ This includes those units provided under license.

Supply of Care Home bed spaces

- 4.37 At present across Tandridge the provision of specialist care accommodation is summarised in table 4.4, with the full list of relevant schemes included at [Appendix 3 \(personal care\)](#) and [4 \(nursing care\)](#).
- 4.38 A search of the EAC website was also used to identify the provision of care homes within Tandridge, either with or without nursing care.

Table 4.4: Indicative Levels of Care Bed provision for Tandridge.

	Number of Units/ Places	Current Provision Per 1,000 of Aged 75+ (10,300)⁸	Housing in Later Life Benchmarks	Change in Units to Meet Housing in Later Life Benchmarks (2025)
Personal Care	317 ⁹	32.91	65	+330.5
Nursing Care	537 ¹⁰	50.97	45	-61.5
Total Provision	854	82.91	110	+279

(Source: <http://www.eac.org.uk> and *Housing in Later Life*)

- 4.39 Table 4.4 also includes the benchmark rates of provision set out within Housing in Later Life for care homes, alongside an estimate of existing under provision. In summary it is clear that at the present time the provision of care beds for both personal and nursing care fall below the present demands.
- 4.40 Across the 22 care homes there are a total of 854 care home beds. 262 are provided for personal care and 457 are provided as nursing care. A further 135 beds are provided within homes offering both personal and nursing care such that the split is not easily determined. In such circumstances the total provision has been calculated to identify a present requirement overall. For the purposes of this assessment, we have therefore assumed the split of beds as per the Housing in Later Life approach.
- 4.41 There is another appeal proceeding at present (ref: APP/M3645/W/25/3372747) that seeks to provide an 80 bed care home that, if allowed, would further contribute to the supply. However, given that at present there is no decision on that scheme we do not include that as pipeline supply due to the uncertainty.
- 4.42 There is also another live planning application at present that would provide a 62 bed care home (2024/1325), however there is no indication of when any decision will be forthcoming such that this is not capable of being considered for pipeline supply matters.

⁸ This figure is taken from table 6.1 below.

⁹ It is to be noted that this figure includes 2 homes providing care and nursing care amounting to a total of 135 beds.

¹⁰ It is to be noted that this figure includes 2 homes providing care and nursing care amounting to a total of 135 beds.

4.43 It is relevant to note that of the current supply several of the homes do not offer all rooms as single occupancy, or all as en-suite accommodation either. A list of those homes only offering such accommodation is include at [Appendix 5](#). The provision of en-suite single occupancy bedrooms was set out as an industry standard in the 2003 National Minimum Standards for Care Homes for Older People published by the Department of Health, albeit that these standards are no longer in place. The relevance of considering such minimum standards was considered in the context of an appeal for a 64 bed care home in Mid Sussex (ref: APP/D3830/W/21/3281350 at [CD10.4](#)) where the Inspector noted at paragraph 50 that:

“Furthermore, they do not take account of the significant number of rooms which are not single occupancy and are without any ensuite facilities, agreed by the Council and Appellant to now be a reasonable minimum expectation for registered care bedrooms for older people. On that basis, the need over the plan period would be for 1294 beds, with an immediate need, agreed to be the more important figure, of 658 beds based on a current supply of rooms with at least an ensuite toilet and/or bathroom of 1148 rooms...”

4.44 The Inspector then went on to note at paragraph 51 that:

“On the Appellant’s figures, in the absence of anything similar from the Council, only 11 of the 37 registered care homes in the District have any rooms with an ensuite facility including a wetroom, with an estimate of a small number more than 589 of the current 1518 supply of bedrooms having such a facility. I have no substantive basis to disagree with this analysis and acknowledge that such provision, as is proposed in this case, would prevent the need for sharing such facilities, both from a wellbeing perspective and to minimise the spread of infections. On that basis the need would be much greater than the consideration relating to provision of only the minimum ensuite facilities.”

4.45 It is therefore considered unacceptable to still have shared rooms within care homes, and similarly to expect residents to use communal toilet facilities in place of en-suite provision. There is therefore a qualitative assessment that needs to be factored into the approach to determining existing quantitative provision of care home beds.

4.46 It is also entirely appropriate to consider whether or not older care homes, particularly those derived from the conversion of larger properties meet modern access requirements in respect of level access, appropriate corridor widths or even suitable staircases for those with mobility access. This was a factor considered in the context

of an appeal for a 32 bed care home in Elmbridge (ref: APP/K3605/W/20/3257109 at **CD10.5**) where the Inspector commented at paragraph 32 that:

“...the existing buildings are no longer suitable for their current use; I agree. There is no level access from the street, and the buildings have a number of levels, with narrow corridors and a number of short staircases making them unsuited for those with mobility issues. Some of the rooms have en-suite facilities, but others do not and are therefore not to expected modern standards. Some of the bedrooms and bathrooms are sub-standard in size. The communal areas are also sub-standard and there are operational difficulties with the kitchens and the distance to some of the rooms.”

Review of Methodologies

Section 5

National Approach

- 5.1 There are a series of national documents that consider how to determine the need for new extra care developments. The starting point being the NPPF (paragraph 60) and moreover the PPG which recognises that the need for greater provision of specialist housing for older people is critical.

Housing for Older People (2018)

- 5.2 The Communities and Local Government Committee published their second report in February 2018 having received evidence during 2017 from a broad range of experts associated with the delivery of specialist housing for older people. The aim of the report was to understand the issues that were experienced with the delivery of this specialist housing sector and what could be done to ensure that the housing offer for older people was suitable and in sufficient quantum.
- 5.3 The report was published with a series of specific recommendations that were felt necessary by the panel to ensure that the delivery issues were addressed to ensure an appropriate level of provision of this specialist housing is delivered. The headline recommendation of the report was that a national strategy was required to “*bring together and improves the policy on housing for older people...*”
- 5.4 Other key recommendations within the report were:

“The National Planning Policy Framework should be amended to emphasise the key importance of the provision of housing for older people and the new standard approach to assessing need should explicitly address the housing needs of older people.

To facilitate the delivery of new homes, specialist housing should be designated as a sub-category of the C2 planning classification or be assigned a new use class.

Councils should publish a strategy explaining how they intend to meet the housing needs of older people in their area and, in Local Plans, identify a target proportion of new housing to be developed for older people along with suitable, well-connected sites for it.”

HAPPI 4 – Rural Housing (2018)

5.5 The fourth Housing our Ageing Population Panel for Innovation (hereafter referenced as “HAPPI”) report focusses on the specific challenges that older people within rural communities face in regard to their independence and wellbeing as they age within their homes that may prove to be unsuitable.

5.6 The foreword of the report was written by Lord Best and noted that:

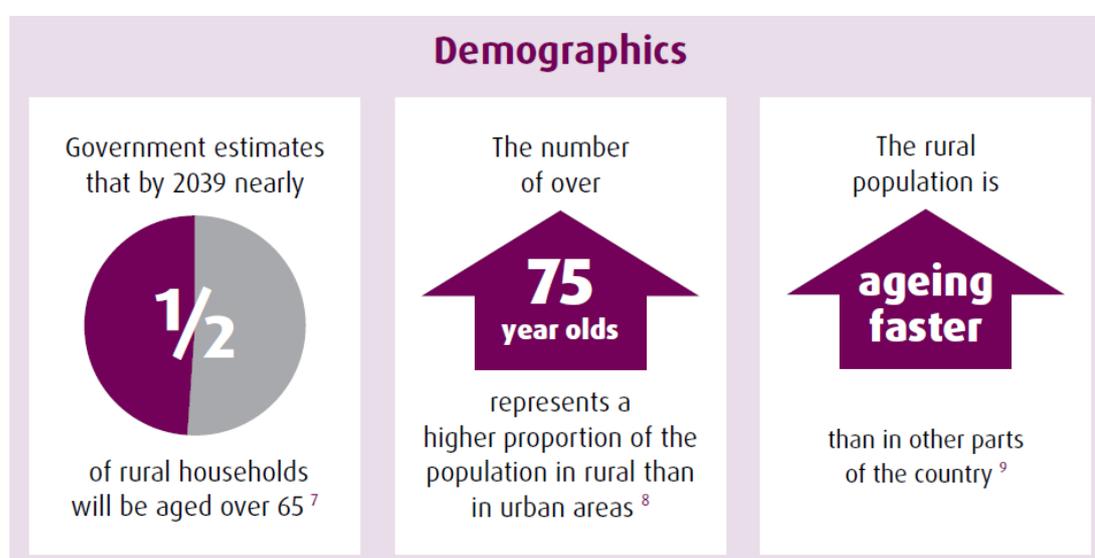
“Our underlying concern is with the growing numbers of older people in rural communities who will face a huge challenge to their independence and wellbeing if their homes are no longer suitable... Our recommendations, therefore, seek to remove the barriers to more and better homes for the ageing population in rural areas.”

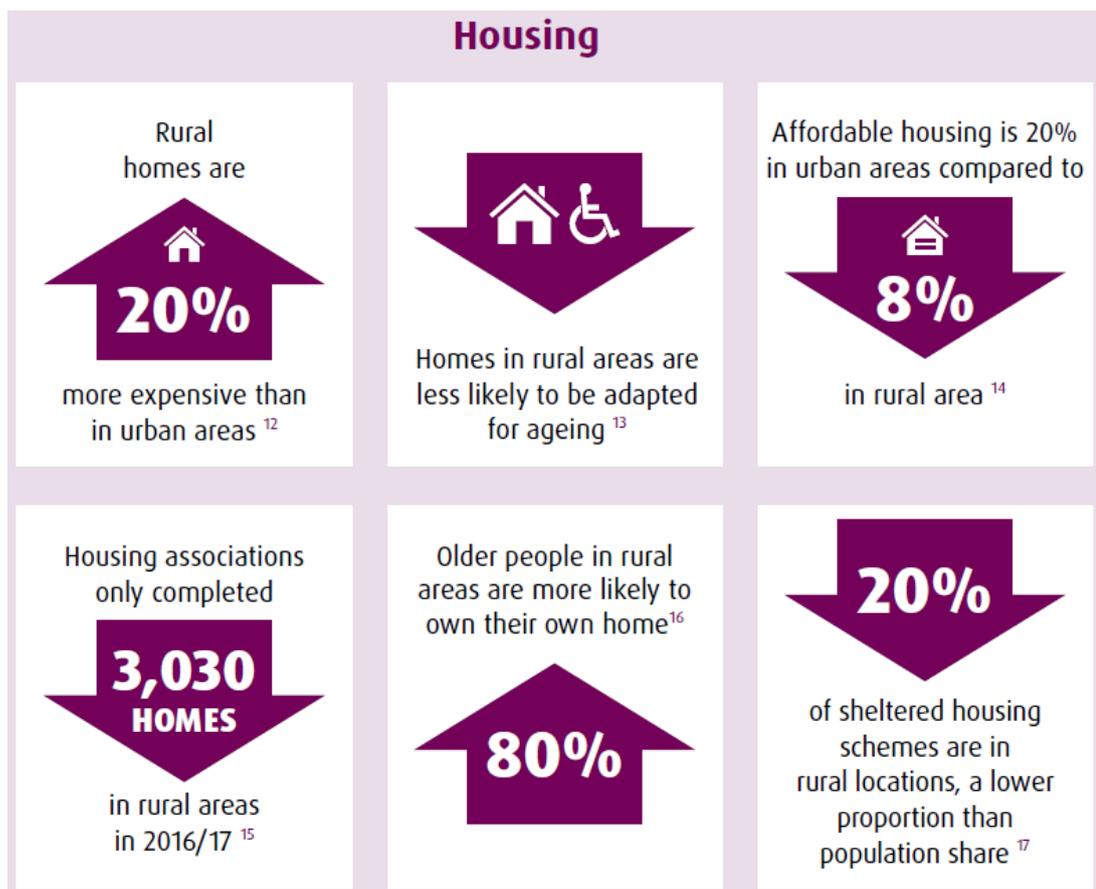
5.7 The 2018 report reflected on the previous report ‘Housing our Ageing Population: Positive Ideas’ from 2016, noting that:

“there was still an urgent need to transform supply and scale-up delivery. It may come as no surprise that, two years on and in our focus on rural housing for older people, we have reached similar conclusions.”

5.8 The report clearly set out that:

“the ageing population in rural areas deserves a new drive for more and better homes, preferably where older people can stay close to friends and family – and the informal networks they provide – and always where the independence can be preserved.”





5.9 It confirmed that the requirement to deliver such specialist housing should be an integral part of national housing strategy and the development plan process.

5.10 The report included a series of recommendations to improve delivery of such accommodation within rural areas; including the following suggestions:

- “Secretary of State for Housing, in taking forward the powers conferred by the Neighbourhood Planning and Infrastructure Act 2017, issues guidance to Local Planning Authorities on meeting the needs of older people in rural communities, e.g., by the allocation of sites in the Local Plan specifically for the housing of older people.
- every Strategic and Local Plan ensures specific sites are allocated for the housing of older people across all tenures.
- to encourage Local Planning Authorities, consider not only the clear advantages from larger developments for older people in market towns but also the community and wellbeing benefits from small retirement housing projects, including almshouses, in villages.

- *landowners take up the opportunities for supporting their local communities while raising capital and/or revenue from developing homes for older people, not least those who are in tied agricultural accommodation and are now retiring.”*

5.11 In considering specific needs of older people the report reflected on a Market Insight report published by Strutt and Parker which identified that by 2033 60% of household growth in the UK would be headed by those aged over 65 and the sole occupiers would make up 41% of all households in the UK. When translated to the older population this amounts to approximately 3.8 million people, of which 70% are women. The report therefore recognised the challenge in ensuring provision of suitable accommodation for this age profile.

Inquiry into decent and accessible homes for older people (2019)

5.12 This report was published by the All Party Parliamentary Group (hereafter referenced as “**APPG**”) with the aim of understanding;

“the detrimental impact of poor housing on older people’s physical, mental and social wellbeing.”

5.13 The report highlights that

“Many older people are living in unsafe, unsuitable and unhealthy accommodation, with little hope of being able to move somewhere better or improve their homes.”

5.14 It considers the linkages between housing, health and care recognising that there are:

“links between living in unsuitable accommodation and increased feelings of social isolation and loneliness among older people.”

5.15 The report suggests 13 recommendations that it suggests that the government should accept, including recommendation 11 which states specifically that:

“Government must make it easier to deliver better alternatives for older people living in unsuitable housing. This should include funding and planning reforms to expand the availability of housing with care, such as extra care housing, in both the private and social sectors as well as making sure alternative accessible and affordable general purpose housing is available to buy or rent.”

5.16 When considering the justification for this recommendation the report noted that:

“less than 10 per cent of local authorities have both an older persons’ housing planning policy and allocated site for such housing.”

- 5.17 The report also specifically quotes the Retirement House Builder Group who told the committee that:

“At a local level we need to see forward-looking local planning policies that predict, monitor and encourage the supply of retirement housing. Planning authorities should be required to publish a strategy explaining how they intend to meet needs of older people in their area alongside a target housing number for older people in their Local Plan.”

Too Little, Too Late: Housing for an Ageing Population (2020)

- 5.18 This report, published by the Centre for the Study of Financial Innovation, is not a report on methodology but a review of the present situation concerning the supply of specialist accommodation to address the housing stock, as well as the implications on the health and social care sector.
- 5.19 The report sets out that if people lived in homes more suited to their needs than 50,000 fewer homes may need to be built every year, recognising that the average household size has been dropping since the 1980s. Statistically it indicated that by 2040 within those households for the over 65s cohort would have 12.8million surplus bedrooms in their properties (previously in 2000 the figure was 6.6million).
- 5.20 The report also set out that on average only 7,000 specialist retirement properties have been built annually since 2010 despite the over 65s households rising annually by 180,000 by 2030. It confirmed that retirement housing accounted for approximately 125,000 new homes built since 2000 (equivalent to approximately 2% of all homes), whilst each year around 700,000 people turn 65 years old.
- 5.21 The report identified a set of key recommendations for the government and the industry, chief amongst them was to ensure greater delivery through new government strategies and joined up working.

Mayhew Review 2022

- 5.22 The Mayhew Review was authored by the same author of ‘*Too Little, Too Late*’ and sought to build on earlier work with the input of the retirement sector in order to reflect the present difficulties in delivering schemes and provide a resource for the taskforce for older people.
- 5.23 The report set out the clear demographic picture in the executive summary, noting that

“The population aged 65+ is set to increase from 11.2 million today to 17.2 million by 2040. It will be much more evenly spread than at present, with older people accounting for 25-30% of the population in many areas. The vast majority will live in standard housing while as many as 6.2 million will live alone – half of them aged 80+ – piling pressure on geographically dispersed care services.”

5.24 It then noted that:

“If everybody lived in homes that were appropriate in size for their needs, it has been estimated that 50,000 fewer homes would need to be built each year¹¹. Almost as many bedrooms are being decommissioned through under-occupation as are being replenished by new homes. In contrast, we estimate that for each bedroom added to the retirement stock, two to three are released in mainstream housing.”

5.25 Noting the historical low rate of delivery (again the reference back to the ‘Too Little, Too Late’ report) the Mayhew Review considered options for a new approach to delivery that would:

“entail the acceleration of building to 10,000, 30,000 and 50,000 new retirement units a year. The third scenario is especially significant because it implies around 25% of all new homes built would be specialist retirement accommodation, representing a radical departure from present housing policy which focuses on first time buyers.”

5.26 The reasoning behind the highest delivery rate would be to:

“displace more expensive nursing and residential care as people would be healthier and supported in their own homes for longer.”

5.27 Whilst not therefore a methodology towards increasing delivery, the review links the clear benefits from provision of specialist accommodation with freeing up under occupied family housing as well as savings in the health and social care system as well as welfare benefits for residents themselves.

¹¹ Linking back with the ‘Too Little, Too Late’ report

Our Future Homes: Housing that promotes wellbeing and community for an ageing population. [CD6.38]

- 5.28 As with the Mayhew Review, this report does not of itself set out a methodology to determine future need and supply. It does however reaffirm the position of the Mayhew Review stating at page 49 that:

“It is estimated that the number of households aged 65+ will grow by 37.3% by 2040, so the supply of later living housing will need to be boosted by over a third just to maintain its current coverage. Indeed, the Mayhew Review found that to ease the pressure on the NHS and social services the Government needs to construct OPH/LLH at the rate of 50,000 new units a year compared with the “meagre” 5-7,000 currently being built. This is particularly worrying given that there has been a reduction in the numbers of private developers of OPH/LLH in the UK in the last 40 years. Current delivery rates are at a fraction of late 1980’s peak and falling. Overall, the UK is significantly far behind other developed countries in delivering the volume of stock required.”

- 5.29 Chapter 6 of the report is dedicated to recommendations to strengthen planning policies, noting at paragraph 61 that:

“There is currently no consensus on the best way of evidencing need for OPH/LLH and there was frustration at this expressed from all quarters. LPAs who responded to the Taskforce’s housing survey reported using multiple methodologies, including external consultants, census and survey data and the Housing LIN model (currently being updated). The inconsistent approaches and subsequent lengthy and costly appeal decisions have endorsed appellants’ views that the standard toolkits underestimate need, are over complicated, are based on past data rather than aspiring to meet future needs, and are not always transparent or consistent.

LPAs frequently underestimate need by extrapolating from past delivery, which means ignoring both previously unmet demand and the increased demand arising from the ageing population.

Evidence taken from industry experts also made clear that housing needs assessments do not recognise the benefits for senior citizens of moving into supportive communities ahead of reaching a personal crisis and undervalue the benefits of more age-appropriate housing.”

- 5.30 It continues on page 62 to note:

“A standard approach to housing needs assessment should reconcile simplicity with enough flexibility to reflect local variations. One way forward would be for the Government to publish proposed prevalence rates for OPH/LLH for age cohorts starting from the age of 55 years. LPAs can then model their future population age profile and apply the prevalence rates to their estimates to assess their future OPH/LLH needs.”

5.31 The ambitions from the report are then set out across pages 64 and 65 noting:

*“**Introducing a planning policy presumption in favour of OPH/LLH to scale up appropriate housing for an ageing population. The recent revision to paragraph 63 of NPPF should be used as the platform and OPH/LLH should be given an increased profile in the NPPG. The language needs to give significant weight to the urgency of provision and to ensure that planning for OPH/LLH is aligned with local objectives, supports wellbeing and community integration and delivers viable high-quality design and the provision of social infrastructure.**”*

...

*“**Revising the NPPG and developing a new National Development Management Policy (NDMP) to positively profile OPH/LLH and include specific agreed requirements for LPAs to make provision, allocate sufficient land in varied locations (town centre to greenfield) and recognise the nuances of the form and function of the various types of OPH/LLH to ensure the viable delivery of sufficient OPH/LLH.**”*

...

*“**Establishing a common standardised methodology for local assessment of minimum need for the various forms of OPH/LLH (as a subset of overall housing) which is simple, universally recognised, transparent and available for LPAs to use free of any costs. Also, to establish national prevalence rates for each type of OPH/LLH which are not based on past delivery but is instead aspirational and outcome driven in line with the Chief Medical Officer’s annual report from 2023 to help guide practice.**”*

5.32 The OPTH report importantly recognises a need for a standardised methodology to positively plan for the increased delivery of older persons housing, and importantly that this needs to start from the age cohort of 55 and over.

Alternative Methodologies

- 5.33 As outlined previously in Section 2 of this report, the PPG sets out that understanding how the ageing population affects housing needs should be considered from the early stages of plan-making. In identifying the housing requirements of older people, the PPG refers to the use of Census data to establish population profiles as well as projections of population and households by age group. The PPG (paragraph 004) also states that the future need for specialist accommodation for older people broken down by tenure and type may need to be assessed and can be obtained from a number of online toolkits provided by the sector.
- 5.34 At present there is no standardised methodology used to calculate future demand for care accommodation and many of the existing models are based on existing prevalence rates of provision rolled forward as population changes. This tendency to base need on prevalence rates results in a skewing of data in that it assumes a lack of any provision is due to a lack of demand and not due to any historic under supply.
- 5.35 Similar issues have arisen in the past with the misuse in particular of the @SHOP toolkit referenced in the PPG when preparing SHMAs or LHNAs in particular, resulting in the removal of this toolkit as a free at source option. The @SHOP toolkit required a consideration of local factors to determine the supply ratios.
- 5.36 The lack of clear guidance on a standardised methodology is also evident from the recently published NPPF 2025 consultation where, in respect to a continued requirement for local planning authorities to take into account an assessment of the size, type and tenure of housing or other accommodation needed for different groups through policy HO1, Question 49 of the consultation specifically notes:
- “49) Is further guidance required on assessing the needs of different groups, including older people, disabled people, and those who require social and affordable housing? Strongly agree, partly agree, neither agree nor disagree, partly disagree, strongly disagree.***
- If so, what elements should this guidance cover?”*
- 5.37 This assessment for demand for specialist older persons accommodation has been based on the general methodology adopted by Contact Consulting as referenced in ‘Housing for Later Life’ and the @SHOP toolkit as referenced within the NPPF.
- 5.38 For comparison the various available models to predict need are set out in table 5.1 below.

Table 5.1: Summary of alternative needs modelling (per 1,000 population aged 75+)

	Sheltered housing		Extra Care Housing		Care Homes
	Rent	Lease	Rent	Lease	
More Choice, Greater Voice (2008)	50	75	12.5	12.5	110*
SHOP@ (2011)	50	75	15	30	
Housing in Later Life (2012)	60	120	15	30	
SHOP@ 2013	50	75	25		

* Split as 65 for personal care and 45 for nursing care

5.39 The matter of choosing the appropriate provision rates for extra care accommodation was debated at length in the context of a recent section 78 planning appeal for a continuing care retirement community care village of up to 133 units¹². In that appeal the Inspector noted the following key paragraphs:

“38. Mr Appleton sets out a provision rate for private extra care of 30 per 1,000 of the 75 and over population in the District based on a total provision of 45 extra care units per 1,000 (4.5%) across both the affordable and private sectors, but split on a ratio of one third for social rented and two thirds for sale. This takes into consideration the research in “More Choice: Greater Voice” and revisions in “Housing in Later Life”. I note that the 45 units per 1,000 is to be divided as suggested in order to bring supply into closer alignment with tenure choice among older people.”

“40. In my view, there is a strong case that Mr Appleton’s 45 per 1,000 overall, with 30 per 1,000 to market extra care, should be far more ambitious given not only the true tenure split in the District but also what it could mean for the ability to contribute towards addressing the housing crisis. Mrs Smith conceded that the figure of 30 per 1,000 was hardly ambitious and, if anything, was underplaying the scale of the potential need.”

“44. But the fact is it [SHOP tool] only provides a figure based on existing prevalence and then seeks to project that forward with a proportion increase based on the increase in the 75+ age group in the District. This is not a measure of need.”

5.40 This same topic has also been discussed in the context of a previous appeal for a development of 222 units of care accommodation¹³. In that appeal the Inspector noted at paragraph 76 that:

¹² APP/Q3115/W/20/3265861

¹³ APP/K3605/W/20/3263347

“The prevalence rates for extra care and enhanced sheltered together, as defined by the Council are as follows:

- *SHOP@ 45 per 1000 people over 75; and*
- *Housing in Later Life/SHOP: 65 per 1000 people over 75”*

5.41 The Inspector then noted at paragraph 77 that:

“This is a significant difference which makes a considerable variation to the overall assessment of need.”

5.42 Moreover, in this appeal it is also notable that the inspector then went on to state at paragraph 77 that:

“I am conscious that these prevalence rates do not take into account that there may be those in the age cohort 65-74 years of age who also require Housing with Care. In my view it would be unsafe to assume that those in that age bracket would not need appropriate housing for their care needs.”

5.43 This approach to including the need for those aged 65-74 was subsequently endorsed by the Inspector in the Epsom General Hospital decision¹⁴ at paragraph 104, where he considered the Walton-on-Thames decision and stated that he shared the same view on need.

5.44 These appeals therefore illustrate that there is a significant range in need identified through the various approaches but that even the higher figures should be more ambitious.

5.45 Although it provides no methodology, as set out above the Mayhew Review commissioned jointly by ARCO sets out the aspirational target of delivering 50,000 units per year.

Age implications

5.46 Specifically in relation to the extra care provision, it is important to note the limitations in the picture of need for specialist housing for older people. The level of need excludes the 65-74 age group entirely from the equation and therefore significantly reduces the overall demand for this form of specialist housing accommodation. This was a matter

¹⁴ APP/P3610/W/21/3272074

that the Inspector in considering the 222 units in Elmbridge¹⁵ was aware of having noted at his paragraph 77 that:

“I am conscious that these prevalence rates do not take into account that there may be those in the age cohort 65-74 years of age who also require Housing with Care. In my view it would be unsafe to assume that those in that age bracket would not need appropriate housing for their care needs.”

- 5.47 Evidence gathered by Carterwood on behalf of ARCO in 2014 identified that as much as 20% of residents within the retirement communities fell within the age range of 65-74, therefore accounting for a significant level of the need within this sector. When looked at in the context of leasehold extra care accommodation the percentage of residents aged 65-74 was 24.9%. It is therefore reasonable to assume that even a 1% allowance for those people aged 65-74 being in need of extra care accommodation is appropriate for the purposes of demonstrating current and future need.

Local Level

- 5.48 At present there is no standardised methodology used to calculate future demand for care accommodation and many of the existing models are based on existing prevalence rates of provision rolled forward as population changes. This tendency to base need on prevalence rates results in a skewing of data in that it assumes a lack of any provision is due to a lack of demand and not due to any historic under supply.
- 5.49 Similar issues have arisen in the past with the misuse in particular of the @SHOP toolkit referenced in the PPG when preparing SHMAs or LHNAs in particular, resulting in the removal of this toolkit as a free at source option. The @SHOP toolkit required a consideration of local factors to determine the supply ratios.

¹⁵ APP/K3605/W/20/3263347

Needs Assessment to 2045

Section 6

6.1 The needs assessment is based on the entire area of Tandridge as opposed to any defined catchment area as can sometime be referenced within assessments. The data in this section has been obtained via POPPI (Projecting Older People Population Information), which only looks at the specific needs of the over 65s age group.

Requirement between 2025 and 2045

6.2 Population projections for the over 65 age group within Tandridge are also provided by POPPI as below:

Table 6.1: Population Aged 65+ between 2025 and 2045

	2025	2030	2035	2040	2045
People aged 65-69	4,900	5,600	5,600	5,300	5,200
People aged 70-74	4,200	4,500	5,200	5,200	5,000
People aged 75-79	4,400	3,800	4,200	4,800	4,900
People aged 80-84	2,900	3,800	3,400	3,700	4,300
People aged 85-89	1,800	2,200	2,800	2,600	2,900
People aged 90+	1,200	1,400	1,700	2,200	2,400
Total population 65+	19,400	21,300	22,900	23,800	24,700
Total population 75+	10,300	11,200	12,100	13,300	14,500

(Source: POPPI)

6.3 The total population of Tandridge over 75 years of age is projected to increase by 4,200 between now and 2045. The largest increase in absolute terms between 2025 and 2045 is in the 80-84 age range with 1,400 additional people in the age group. The smallest increase in absolute terms being within the 65-69 age range with 300 additional people.

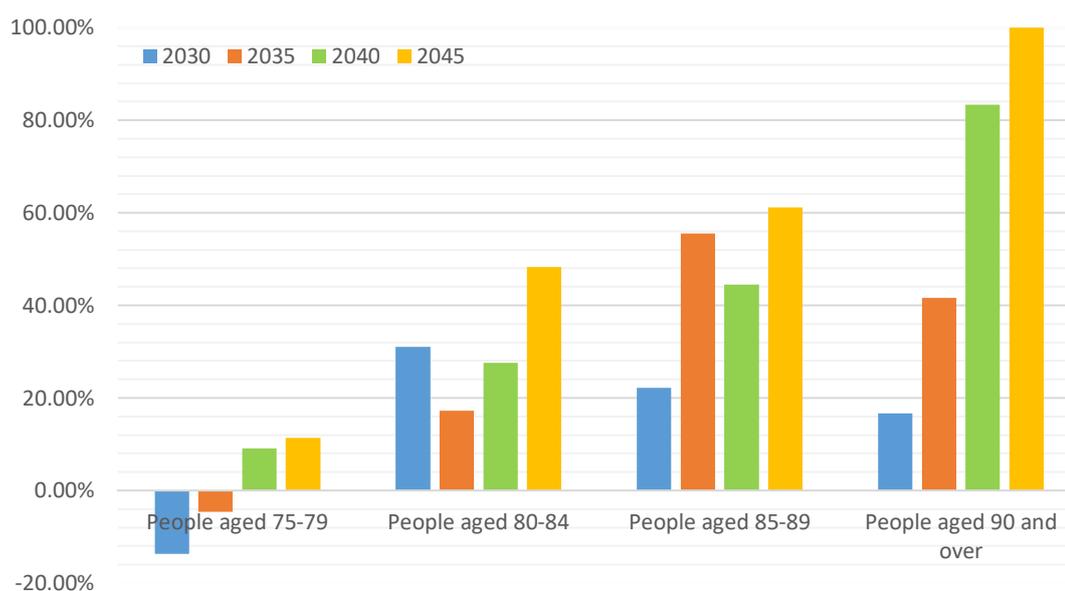
6.4 The growth is represented as below:

Table 6.2: Population Aged 75+ between 2025 and 2040 as real growth and % change

	2030		2035		2040		2045	
	Change	%	Change	%	Change	%	Change	%
People aged 75-79	-600	-13.64%	-200	-4.55%	400	9.09%	500	11.36%
People aged 80-84	900	31.03%	500	17.24%	800	27.59%	1,400	48.28%
People aged 85-89	400	22.22%	1,000	55.56%	800	44.44%	1,100	61.11%
People aged 90+	200	16.67%	500	41.67%	1,000	83.33%	1,200	100.00%
Total pop.75+	900	4.64%	1,800	9.28%	3,000	15.46%	4,200	21.65%

(Source: POPPI)

Figure 6.1: Population Change between 2025 and 2045 (over 75s)



6.5 Having identified the current position (namely that set out in tables 4.3 and table 4.4), it is relevant to project the need through to 2045 which, as per table 6.1, identified a further 4,200 people.

Table 6.3: Projected Levels of Provision of Various Forms of Accommodation for Older People 2025-2045, for Tandridge.

	Housing in Later Life Benchmarks	Increase in Units Required to Meet Housing in Later Life Benchmarks (2025-2045)
Extra care (rent)	15	+63
Extra care (lease)	30	+126
Personal Care	65	+273
Nursing Care	45	+189

(Source: <http://www.eac.org.uk> and *Housing in Later Life*)

6.6 The total need for 2025 to 2045 therefore must include the current unmet need as set out in tables 4.3 and 4.4, as well as the future requirement from table 6.3.

6.7 It is also important to make additional provision for those aged 65 to 74 in respect of extra care provision, which we set at a nominal rate of 1% of the total population of that age group as explained in the preceding section. In 2025 the 65-74 age group has a population of 9,100, increasing to 10,200 by 2045. This is set out in table 6.4 below.

Table 6.4: Cumulative Projected Levels of Need up to 2045, for Tandridge.

	2025 requirement	2025 to 2045 requirement	Total number required up to 2045
Extra care (rent) 65-74	+30	+4	+34
Extra care (lease) 65-74	+61	+7	+68
Extra care (rent) 75+	+117.5	+63	+180.5
Extra care (lease) 75+	+74	+126	+200
Total extra care	+282.5	+200	+482.5

Personal Care	+330.5	+273	+603.5
Nursing Care	-61.5	+189	+127.5
Total care beds	+269	+462	+731

(Source: <http://www.eac.org.uk> and *Housing in Later Life*)

- 6.8 This assessment demonstrates that over the 20 year period through to 2045 there would be a need for a further 482.5 extra care units, split as 214.5 in the social rent sector and 268 in the leasehold or private rent sector.
- 6.9 Within the care home sector, a total of 731 additional beds are required over this period, predominantly within the personal care sector. As noted in section 4 though, this does not take into account current provision that fails to meet the single person occupancy within en-suite accommodation.
- 6.10 The operators have not all provided details on the quality of room provision but from those who have given details it indicates that 77.67 % of the care home beds are single occupancy with en-suite (260 beds from 339) whilst in the nursing home sector the figure is 63.43 % (333 beds from the present 525). If these figures were used instead to determine current provision, then it is clear that within both elements there would be significant under provision as of 2025 as shown in table 6.5 below.

Table 6.5: Cumulative Projected Levels of Need up to 2045, for Tandridge (single, en-suite rooms only).

	2025 requirement	2025 to 2045 requirement	Total number required up to 2045
Personal Care	+409.5	+273	+682.5
Nursing Care	+130.5	+189	+319.5
Total beds	+540	+462	+1,002

(Source: <http://www.eac.org.uk> and *Housing in Later Life*)

Dementia provision

- 6.11 In addition to normal care home provision, the need for specialist dementia care provision also needs to be considered. There is no specific means of identifying the current level of provision however within these homes as all beds could be used for those with dementia, similarly none could be in use. It is therefore only realistic to consider what the future requirements would be above and beyond the current levels as of 2025.
- 6.12 Having identified the current position, it is relevant to project the need through to 2045 based upon the population projections set out above. This sets out that between 2025 and 2045 the 75+ age group was projected to increase by 4,200 to a total of 10,500 people aged 75+.

Table 6.6: Cumulative Projected Levels of Dementia Need up to 2045, Tandridge

	Housing in Later Life Benchmarks	Current Requirement to Meet Housing in Later Life Benchmarks (2025)	Increase in Units Required to Meet Housing in Later Life Benchmarks (2025-2045)	Total number required up to 2045
Dementia care	6	61.8	25.2	87

(Source: Housing in Later Life)

- 6.13 The total need for 2025 to 2045 therefore must include the current unmet need as well as the future requirement through to 2045. This is set out in table 6.6 above, indicating a need for 87 specialist dementia beds within the care home sector, in addition to those numbers identified in table 6.4 above.

Conclusion for 2025 to 2045 need

- 6.14 The data indicates that on a quantitative assessment by 2045 there would be a need for an additional provision of 603.5 beds for personal care and 127.5 beds for nursing care. In addition, there would be a total requirement for 87 dementia beds.
- 6.15 If the qualitative assessment were used (the figures in table 6.5) then the future need would be read as 682.5 beds for personal care and 319.5 beds for nursing care. The dementia requirement would remain the same at 87 dementia beds.
- 6.16 Whilst the implications of the qualitative assessment are relatively minor in respect of the personal care provision, there is a substantial impact on nursing care provision when adopting the qualitative assessment.

Needs Assessment to 2029

Section 7

7.1 For the purposes of a needs assessment looking to address short term needs as well as future requirements the immediate 5-year period is of great relevance. The same population figures for the period 2025 to 2029 are therefore reflected below.

Table 7.1: Population Aged 65+ between 2025 and 2029

	2025	2026	2027	2028	2029
People aged 65-69	4,900	5,000	5,200	5,300	5,500
People aged 70-74	4,200	4,200	4,300	4,300	4,400
People aged 75-79	4,400	4,300	4,000	3,900	3,900
People aged 80-84	2,900	3,200	3,500	3,700	3,700
People aged 85-89	1,800	1,800	1,900	2,000	2,100
People aged 90+	1,200	1,200	1,300	1,300	1,400
Total population 65+	19,400	19,700	20,200	20,500	21,000
Total population 75+	10,300	10,500	10,700	10,900	11,100

(Source: POPPI)

7.2 This 5-year figure shows that the population aged 75 and over will increase by 800 residents. The largest growth is in the 80-84 age group with 800 additional people, whilst the 75-79 age group reduces by 500 people.

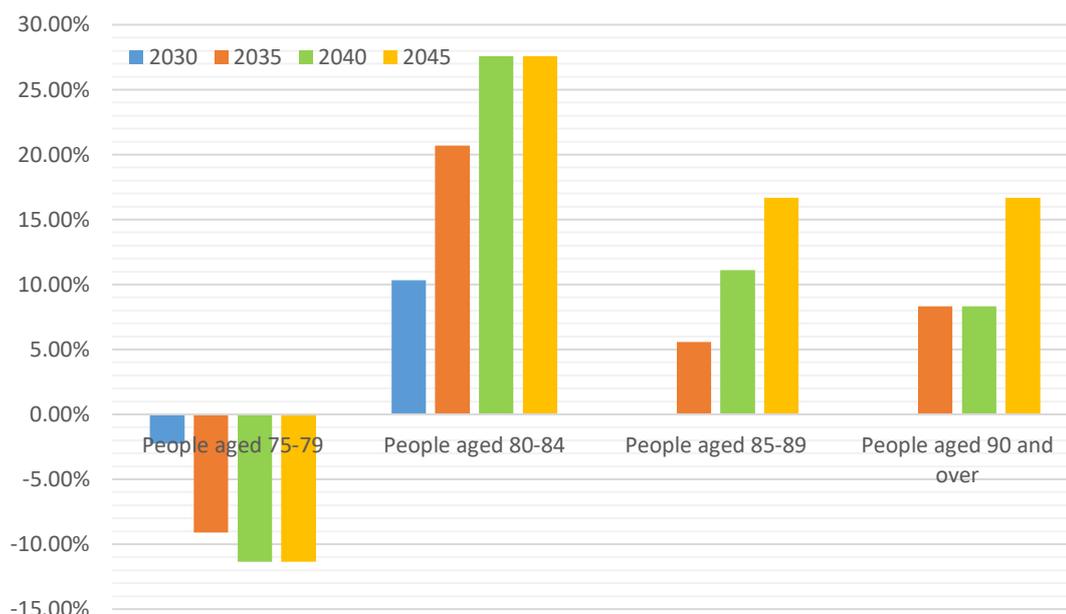
7.3 The growth is represented as below:

Table 7.2: Population Aged 75+ between 2020 and 2029 as real growth and % change

	2026		2027		2028		2029	
	Change	%	Change	%	Change	%	Change	%
People aged 75-79	-100	-2.27%	-400	-9.09%	-500	11.36%	-500	11.36%
People aged 80-84	300	10.34%	600	20.69%	800	27.59%	800	27.59%
People aged 85-89	0	0.00%	100	5.56%	200	11.11%	300	16.67%
People aged 90+	0	0.00%	100	8.33%	100	8.33%	200	16.67%
Total pop.75+	200	1.03%	400	2.06%	600	3.09%	800	4.12%

(Source: POPPI)

Figure 7.1: Population Change between 2025 and 2029 (over 75s)



7.4 Having identified the current position, it is relevant to project the need through to 2029 based upon the population projections set out above. This sets out that between 2025 and 2029 the 75+ age group was projected to increase by 800 to a total of 11,100 people aged 75+. Future provision would be calculated using the same benchmark figures used in table 4.2 above.

7.5 The total need for 2025 to 2029 therefore must include the current unmet need as of 2025 (tables 4.3 and 4.4) and the future requirement through to 2029, including the allowance for those aged 65 to 74 in respect of extra care accommodation. This is set out in table 7.3 below.

Table 7.3 Cumulative Projected Levels of Need up to 2029, for Tandridge.

	2025 requirement	2025 to 2029 requirement	Total number required up to 2029
Extra care (rent) 65-74	+30	+3	+33
Extra care (lease) 65-74	+61	+5	+66
Extra care (rent) 75+	+117.5	+12	+129.5
Extra care (lease) 75+	+74	+24	+98
Total extra care	+282.5	+44	+326.5
Personal Care	+330.5	+52	+382.5
Nursing Care	-61.5	+36	-25.5
Total care beds	+269	+88	+357

(Source: <http://www.eac.org.uk> and *Housing in Later Life*)

7.6 This assessment demonstrates that over the 5 year period through to 2029 there would be a need for a further 326.5 extra care units, split as 162.5 in the social rent sector and 164 in the leasehold or private rent sector.

7.7 For care homes the same table demonstrates that up to 2029 there would be a need to provide a further 357 care beds, albeit there would remain a small oversupply of nursing beds to the amount of 25.5 beds.

7.8 As with the consideration of need to 2045, if only considering single occupancy ensuite provision, then by 2029 there would still be a significant demand for new care home bed provision.

Table 7.4: Cumulative Projected Levels of Need up to 2029, for Tandridge (single, ensuite rooms only).

	2025 requirement	2025 to 2029 requirement	Total number required up to 2029
Personal Care	+409.5	+52	+461.5
Nursing Care	+130.5	+36	+166.5
Total beds	+540	+88	+628

(Source: <http://www.eac.org.uk> and *Housing in Later Life*)

Dementia provision

7.9 Having identified the current need (that set out in table 5.7 above), it is relevant to project the need through to 2029 based upon the population projections set out above. This sets out that between 2025 and 2029 the 75+ age group was projected to increase by 800 to a total of 11,100 people aged 75+. As set out in table 7.5 below, this results in the need for a further 66.6 specialist dementia beds.

Table 7.5: Cumulative Projected Levels of Dementia Need up to 2027, Tandridge

	Housing in Later Life Benchmarks	Current Requirement to Meet Housing in Later Life Benchmarks (2025)	Increase in Units Required to Meet Housing in Later Life Benchmarks (2025-2029) ¹⁶	Total number required up to 2029
Dementia care	6	61.8	4.8	66.6

7.10 The total need for 2025 to 2029 therefore must include the current requirement as set and the future requirement through to 2029. This is set out in table 7.5 above, indicating a need for 66.6 specialist dementia beds within the care home sector, in addition to those numbers identified in table 7.3 above.

Conclusion for 2023 to 2027 need

7.11 The data indicates that on a quantitative assessment by 2029 there would be a need for an additional provision of 382.5 personal care beds, whilst there would be an

¹⁶ Based on the figure from table 5.2 above for those aged 75+ in 2040

oversupply of 25.5 nursing beds. In addition, there would be a total requirement for 66.6 dementia beds.

7.12 If the qualitative assessment were used the supply of current personal care beds would be reduced by 461.5 beds, whilst in the nursing care sector the supply would need to increase by a total of 166.5 beds. The dementia requirement would remain the same at 66.6 dementia beds.

7.13 Whilst the implications of the qualitative assessment are relatively minor in respect of the personal care provision, there is a substantial impact on nursing care provision when adopting the qualitative assessment.

Alternative Growth Scenarios

Section 8

8.1 Noting the continuing debate regarding the appropriate levels for determining demand and future provision for specialist accommodation for older people, this section of the report considers the implications of alternative growth scenarios when moving away from the figures adopted in the Housing in Later Life publication and opting for more ambitious targets as acknowledged in recent appeals¹⁷. There are different approaches for extra care provision and care home beds as detailed below.

Extra Care accommodation (leasehold only)

8.2 The Housing in Later Life publication adopted a ratio of 30 units per 1,000 over 75 for the leasehold market at a time when the sector was still relatively new. This section therefore explores alternative ratios of 45, 60 and 90 per 1,000 to consider the implications of adopting a more ambitious strategy for delivering extra care development in order to realise the acknowledged benefits. These higher ratios assume that extra care becomes more prevalent and therefore becomes the preferred choice compared to sheltered, enhanced sheltered and care home provision.

8.3 We have only modelled these alternative scenarios for the longer term as it will take longer for such provision to increase so as not to be a realistic assumption through to 2029, particularly noting the historic failure for current provision to meet the identified needs as far back as the adopted core strategy position.

Table 8.1 Cumulative Projected Levels of Need for leasehold extra care up to 2045, for Tandridge adopting a ratio of 45 per 1,000 over 75.

	Existing provision	Current Provision Per 1,000 ¹⁸	New ratio	Increase in units required for 2025	Increase in units required by 2045 ¹⁹	Total new provision required
Extra Care Housing (75+)	235	22.8	45	228.66	189	417.66
Extra Care Housing (65-74) ²⁰	-	-	-	61	7	68
Grand total up to 2045				289.66	196	485.66

¹⁷ APP/Q3115/W/20/3265861

¹⁸ This figure is taken from table 4.3 above.

¹⁹ This figure taken from table 4.3 above for the over 75 increase between 2025 and 2045.

²⁰ This figure is taken from table 7.3 above.

Table 8.2 Cumulative Projected Levels of Need for leasehold extra care up to 2045, for Tandridge adopting a ratio of 60 per 1,000 over 75.

	Existing provision	Current Provision Per 1,000	New ratio	Increase in units required for 2025	Increase in units required by 2045	Total new provision required
Extra Care Housing (75+)	235	22.8	60	383.16	252	635.16
Extra Care Housing (65-74)	-	-	-	61	7	68
Grand total up to 2045				444.16	259	703.16

Table 8.3 Cumulative Projected Levels of Need for leasehold extra care up to 2045, for Tandridge adopting a ratio of 90 per 1,000 over 75.

	Existing provision	Current Provision Per 1,000	New ratio	Increase in units required for 2025	Increase in units required by 2045	Total new provision required
Extra Care Housing (75+)	235	22.8	90	692.16	378	1,070.16
Extra Care Housing (65-74)	-	-	-	61	7	68
Grand total up to 2045				753.16	385	1,138.16

- 8.4 These alternative growth scenarios demonstrate that through adopting more ambitious targets for delivery of specialist extra care accommodation the level of choice in the market for older persons will increase significantly and with it achieve the realisation of greater benefits not only for those residents but the wider community as a whole.
- 8.5 The increased growth is demonstrated even with a remaining constant of just 1% of the 65 to 74 age group being considered for extra care accommodation. If that figure were to be increased as well then, the impacts on future provision would only increase, however that is not considered necessary or justified on the basis that evidence from operators indicates that the majority of residents on moving into extra care schemes are in their 70s.
- 8.6 It is of course also pertinent to note that this only considers the market sector whereas it would be feasible to also model alternative growth scenarios for the affordable sector given the approach adopted by the County Council in their population profile report (October 2025) which seeks to reduce future needs for residential care provision on the basis of a belief in increased provision of affordable extra care accommodation.
- 8.7 Whilst these alternative growth scenarios are considered useful, particularly in light of the suggestions from the Mayhew Review proposing the delivery of up to 50,000 units of such specialist accommodation per year they are not used for the basis of the needs assessment as that relies on the figures derived from Housing in Later Life given its provenance on appeal.

Care home provision

8.8 It is also relevant to note that separate to the Housing in Later Life approach there are other methodologies to determine future demand for care homes. One such alternative is the LaingBuisson model which assumes the following demand:

- 65 to 74 years: 0.57% of the population;
- 75-84 years: 3.6% of the population; and
- 85+ years: 14.7% of the population.

8.9 If the LaingBuisson approach were therefore used instead then the assessment would be as follows, based on the population figures included in table 8.4:

Table 8.4: Care home bed demand (2025 to 2045)

	2025	2045
People aged 65-74	51.87	58.14
People aged 75-84	262.8	331.2
People aged 85+	441	779.1
TOTAL	755.67	1,168.44

Table 8.5: Care home bed demand (2025 to 2029)

	2025	2029
People aged 65-74	51.87	56.43
People aged 75-84	262.8	273.6
People aged 85+	441	514.5
TOTAL	755.67	844.53

8.10 These figures demonstrate a lower level of demand than using the Housing in Later Life referenced in sections 6 and 7 above. Moreover, this model does not seek to differentiate the level of provision between those for personal or nursing care and only provides for the global figure of need.

8.11 Even using the lower modelling as provided by the LaingBuisson methodology, whilst as of 2025 there would be an oversupply of 98 beds against the modelled demand, a slightly oversupply of 9 beds in 2029, and a shortfall of 314 beds by 2045 when modelled against current and pipeline supply.

8.12 As with the assessment undertaken in sections 6 and 7 though, the LaingBuisson approach does not take into account the inclusion of double occupancy rooms or non en-suite accommodation within the existing supply. Factoring in such provisions would reduce the supply to generate shortfalls at every year.

8.13 The operation of care homes is also an important consideration when assessing supply against demand given that there needs to be choice in the market, a buffer for spare capacity in the case of home closures (an issue that is more common of late), and the need for the necessary procedures to clean rooms on the death of occupants before

rooms are available again. Other factors that may limit the availability of beds within homes can include staffing constraints, rooms being reconfigured for other uses, or rooms undergoing refurbishment. It is therefore standard practice for homes to only remain occupied at around 90% of their full capacity to handle such events.

- 8.14 POPPI itself also provides data on likely care home occupancy and dementia numbers over the same period considered in this assessment, namely 2025 to 2045 as well as 2025 to 2029.
- 8.15 In respect of care home occupancy, the relevant information for both periods is included in [Appendix 1](#).
- 8.16 For the period through to 2045 the data indicates 370 additional residents likely to be living in a care home environment, which is a 60.8% increase. For the period through to 2029 the same data indicates an additional 77 residents likely to be living in a care home environment, which is a 12.6% increase.
- 8.17 Similar data is also provided in respect of dementia prevalence over the same periods.
- 8.18 For the period through to 2045 the data indicates 769 additional residents likely to be living with dementia, which is a 59.5% increase. For the period through to 2029 the same data indicates an additional 138 residents likely to be living with dementia, which is a 10.7% increase.

Summary & Conclusions

Section 9

9.1 The requirement to ensure delivery of a suitable supply of specialist housing for older people to meet their identified needs was set out as far back as PPS3: Housing and is presently reflected at paragraphs 61 and 63 of the NPPF.

9.2 It is the PPG that takes this position further noting in the June 2019 update for “Housing for older and disabled people” that:

“The need to provide housing for older people is critical.” (Paragraph: 001 Reference ID: 63-001-20190626)

9.3 This was also acknowledged by the announcement of a taskforce to address the improved delivery of specialist older persons housing in the Levelling Up white paper released in February 2022.

9.4 At present there is no statutory requirement to set out through development plan policy a figure on need, although the PPG notes that:

“Plan making authorities should set clear policies to address the housing needs of groups with particular needs such as older and disabled people These policies can set out how the plan making authority will consider proposals for the different types of housing that these groups are likely to require They could also provide indicative figures or a range for the number of units of specialist housing for older people needed across the plan area throughout the plan period.”(Paragraph 006 Reference ID 63 006 20190626)

9.5 This assessment has indicated that there is a significant under supply at present of personal care beds, which is set to increase not only by 2029 but significantly so by 2045. In respect of nursing care beds, the current provision results in an oversupply which remains as of 2029, with a relatively small under provision by 2045.

Table 9.1: Overall demand for specialist accommodation between 2025 and 2045 for Tandridge

	2025 requirement	2045 requirement	Total requirement (2025-2045)
Extra care (rent) 65-74	+30	+4	+34
Extra care (lease) 65-74	+61	+7	+68
Extra care (rent) 75+	+117.5	+63	+180.5
Extra care (lease) 75+	+74	+126	+200
TOTAL extra care units	+282.5	+200	+482.5

Personal Care beds	+330.5	+273	+603.5
Nursing Care beds	-61.5	+189	+127.5
Dementia beds	+61.8	+25.2	+87
TOTAL	+330.8	+487.2	+818

9.6 In the alternative, the picture of need in the next immediate 5 years is also summarised below.

Table 9.2: Overall demand for specialist accommodation between 2025 and 2029 for Tandridge

	2025 requirement	2029 requirement	Total requirement (2025-2029)
Extra care (rent) 65-74	+30	+3	+33
Extra care (lease) 65-74	+61	+5	+66
Extra care (rent) 75+	+117.5	+12	+129.5
Extra care (lease) 75+	+74	+24	+98
TOTAL extra care units	+282.5	+44	+326.5
Personal Care beds	+330.5	+52	+382.5
Nursing Care beds	-61.5	+36	-25.5
Dementia beds	+61.8	4.8	66.6
TOTAL care beds	+330.8	+92.8	+423.6

9.7 However, if current provision is assessed in terms of only those beds meeting the modern requirements of single occupancy ensuite rooms, then the provision changes considerably to under supply within both sectors from 2025.

9.8 The Surrey County Council planning guidance (October 2025) set out that it may be possible to renovate or replace properties to bring them up to modern standards, however for older properties that will inevitably result in reduced capacity if renovating to bring all rooms to current standards, or significant financial investment to redevelop sites. Typically, for those less suitable sites redevelopment for alternative uses is more common hence the future need for modern, purpose built care homes to meet future needs.

Appendix 1

Relevant POPPI data

POPPI Data for Tandridge

This appendix to the assessment focuses on the specific over 65 characteristics that relate to propensity for specialist accommodation for older people. The data in this section has been obtained via POPPI (Projecting Older People Population Information), which only looks at the specific needs of the over 65s age group.

As with the main assessment this information considers the impacts both in terms of the longer term (2025 to 2045) and the immediate term (2025 to 2029)

2025 to 2045

1. Care home occupancy

These figures show an expected increase of 379 additional residents to be living within some form of care home accommodation by 2045 against the 2025 baseline data, representing a 35.6% increase.

	2025	2030	2035	2040	2045
People aged 65-74 living in a care home with or without nursing	76	84	90	87	85
People aged 75-84 living in a care home with or without nursing	191	199	199	223	241
People aged 85 and over living in a care home with or without nursing	418	501	641	682	738
Total population aged 65 and over living in a care home with or without nursing	685	784	930	992	1,064

2. Dementia

These figures show an increase of some 797 additional people expected to suffer from dementia by 2045 when measured against the current baseline, which is a 34.7% increase on current levels.

	2025	2030	2035	2040	2045
People aged 65-69 predicted to have dementia	81	93	93	86	86
People aged 70-74 predicted to have dementia	128	137	155	158	152
People aged 75-79 predicted to have dementia	264	235	247	288	295
People aged 80-84 predicted to have dementia	323	411	378	400	478
People aged 85-89 predicted to have dementia	328	399	525	474	545
People aged 90 and over predicted to have dementia	377	436	530	684	743
Total Population Aged 65 and Over Predicted to have Dementia	1,501	1,710	1,929	2,091	2,298

3. Living alone

These figures show an increase of 2,115 people aged 65 and over to be living alone by 2045, otherwise expressed as a near 25.9% increase on current levels.

	2025	2030	2035	2040	2045
Males aged 65-69 predicted to live alone	455	535	535	495	495
Males aged 70-74 predicted to live alone	382	422	482	482	462
Males aged 75-79 predicted to live alone	430	366	387	473	473
Males aged 80-84 predicted to live alone	305	406	356	381	457
Males aged 85-99 predicted to live alone	226	291	388	323	388
Males aged 90+ predicted to live alone	170	213	255	340	383
Females aged 65-69 predicted to live alone	632	705	705	656	656
Females aged 70-74 predicted to live alone	679	708	797	826	797
Females aged 75-79 predicted to live alone	893	818	856	967	1,004
Females aged 80-84 predicted to live alone	813	1,004	956	1,004	1,195
Females aged 85-99 predicted to live alone	622	735	961	904	1,017
Females aged 90+ predicted to live alone	450	507	619	788	845
Total population aged 65 and over predicted to live alone	6,056	6,708	7,295	7,640	8,171

4. Hospital admissions from falls

These figures show an increase of 296 people likely to require hospital admission as a result of falls by 2045, representing a 31.6% increase.

	2025	2030	2035	2040	2045
People aged 65-69 predicted numbers of hospital admissions due to falls	44	50	50	47	47
People aged 70-74 predicted numbers of hospital admissions due to falls	60	64	74	74	72
People aged 75-79 predicted numbers of hospital admissions due to falls	105	91	100	115	117
People aged 80 and over predicted numbers of hospital admissions due to falls	431	540	584	628	701

Total population aged 65 and over predicted numbers of hospital admissions due to falls	640	745	809	864	936
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5. Mobility tasks

These figures show that there are likely to be a further 1,536 residents aged 65 and over unable to undertake on basic task themselves due to mobility issues by 2045, representing an increase of 28.8%. Such basis tasks (although not exhaustive) can 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; and
- getting in and out of bed

	2025	2030	2035	2040	2045
People aged 65-69 unable to manage at least one activity on their own	418	477	477	443	443
People aged 70-74 unable to manage at least one activity on their own	558	594	672	688	662
People aged 75-79 unable to manage at least one activity on their own	744	666	699	810	831
People aged 80-84 unable to manage at least one activity on their own	709	897	832	879	1,049
People aged 85 and over unable to manage at least one activity on their own	1,370	1,590	2,030	2,165	2,350
Total Population aged 65+ Unable to Manage at Least One Activity on Their Own	3,799	4,224	4,710	4,985	5,335

6. Self-care activity

These figures show that that by 2045 an additional 1,822 people aged 65 and over will need help with at least one self-care activity, representing a growth of 25.2%. Such self-care activities relate to personal care and mobility (although not exhaustive) can include:

- Having a bath or shower;
- Using the toilet;
- Getting up and down stairs;
- Getting around indoors;
- Dressing or undressing;
- Getting in and out of bed;
- Washing face and hands;
- Eating, including cutting up food; and
- Taking medicine.

	2025	2030	2035	2040	2045
Males aged 65-69 who need help with at least one self-care activity	382	448	448	415	415
Males aged 70-74 who need help with at least one self-care activity	376	416	475	475	455
Males aged 75-79 who need help with at least one self-care activity	506	430	455	557	557
Males aged 80+ who need help with at least one self-care activity	898	1,122	1,197	1,272	1,421
Females aged 65-69 who need help with at least one self-care activity	484	539	539	502	502
Females aged 70-74 who need help with at least one self-care activity	515	538	605	627	605
Females aged 75-79 who need help with at least one self-care activity	715	656	685	775	805
Females aged 80+ who need help with at least one self-care activity	1,534	1,832	2,045	2,173	2,471
Total Population Aged 65+ who need help with at least one self-care activity	5,409	5,981	6,450	6,795	7,231
Males aged 65-69 with unmet need for at least one self-care activity	327	383	383	355	355
Males aged 70-74 with unmet need for at least one self-care activity	283	313	358	358	343
Males aged 75-79 with unmet need for at least one self-care activity	468	398	421	515	515
Males aged 80 and over with unmet need for at least one self-care activity	806	1,008	1,075	1,142	1,277
Females aged 65-69 with unmet need for at least one self-care activity	377	421	421	392	392
Females aged 70-74 with unmet need for at least one self-care activity	442	461	518	538	518
Females aged 75-79 with unmet need for at least one self-care activity	590	541	566	640	664
Females aged 80 and over with unmet need for at least one self-care activity	1,397	1,668	1,862	1,979	2,250
Total population aged 65 and over with unmet need for at least one self-care activity	4,690	5,193	5,605	5,917	6,314

7. Domestic tasks

These figures show that that by 2045 an additional 1,956 people aged 65 and over will need help with at least one domestic task, representing a growth of 26.6%. Such domestic tasks relate to activities which are fundamental to living independently and (although not exhaustive) can include:

- Doing routine housework or laundry;
- Shopping for food;

- Getting out of the house; and
- Doing paperwork or paying bills

	2025	2030	2035	2040	2045
Males aged 65-69 who need help with at least one domestic task	306	359	359	333	333
Males aged 70-74 who need help with at least one domestic task	323	357	408	408	391
Males aged 75-79 who need help with at least one domestic task	376	320	338	414	414
Males aged 80+ who need help with at least one domestic task	890	1,113	1,187	1,261	1,410
Females aged 65-69 who need help with at least one domestic task	528	589	589	548	548
Females aged 70-74 who need help with at least one domestic task	481	502	564	585	564
Females aged 75-79 who need help with at least one domestic task	658	603	630	712	740
Females aged 80+ who need help with at least one domestic task	1,829	2,184	2,438	2,591	2,946
Total Population Aged 65+ who Need Help with at Least One Domestic Task	5,390	6,026	6,514	6,852	7,346
Males aged 65-69 with unmet need for at least one domestic task	179	211	211	195	195
Males aged 70-74 with unmet need for at least one domestic task	232	256	293	293	281
Males aged 75-79 with unmet need for at least one domestic task	232	197	209	255	255
Males aged 80 and over with unmet need for at least one domestic task	533	666	710	755	844
Females aged 65-69 with unmet need for at least one domestic task	294	328	328	305	305
Females aged 70-74 with unmet need for at least one domestic task	283	295	332	344	332
Females aged 75-79 with unmet need for at least one domestic task	370	339	354	400	416
Females aged 80 and over with unmet need for at least one domestic task	997	1,191	1,330	1,413	1,607
Total population aged 65 and over with unmet need for at least one domestic task	3,120	3,483	3,766	3,960	4,234

8. Limiting long-term illness

These figures are split between those who will be affected to a small degree but a long-term illness, and those who will be affected a lot. There is a growth of 1,048 for those affected slightly (a 23.9% change), compared with 1,093 for those affected a lot (a 29.1% change).

	2025	2030	2035	2040	2045
People aged 65-74 whose day-to-day activities are limited a little	1,222	1,357	1,451	1,410	1,370
People aged 75-84 whose day-to-day activities are limited a little	1,430	1,489	1,489	1,665	1,802
People aged 85 and over whose day-to-day activities are limited a little	689	826	1,056	1,125	1,217
Total Population Aged 65+ with a Limiting Long-Term Illness whose Day-To-Day Activities are Limited a Little	3,341	3,672	3,995	4,200	4,389
People aged 65-74 whose day-to-day activities are limited a lot	696	772	826	803	780
People aged 75-84 whose day-to-day activities are limited a lot	989	1,029	1,029	1,151	1,246
People aged 85 and over whose day-to-day activities are limited a lot	979	1,175	1,501	1,599	1,730
Total Population Aged 65+ with a Limiting Long-Term Illness whose Day-To-Day Activities are Limited a Lot	2,663	2,976	3,356	3,553	3,756

2025-2029

9. Care home occupancy

These figures show an expected increase of 84 additional residents to be living within some form of care home accommodation by 2029 against the 2025 baseline data, representing a 10.9% increase.

	2025	2026	2027	2028	2029
People aged 65-74 living in a care home with or without nursing	76	77	79	80	82
People aged 75-84 living in a care home with or without nursing	191	196	196	199	199
People aged 85 and over living in a care home with or without nursing	418	432	446	460	487
Total population aged 65 and over living in a care home with or without nursing	685	705	721	738	769

10. Dementia

These figures show an increase of some 154 additional people expected to suffer from dementia by 2029 when measured against the current baseline, which is a 9.3% increase on current levels.

	2025	2026	2027	2028	2029
People aged 65-69 predicted to have dementia	81	83	86	89	91
People aged 70-74 predicted to have dementia	128	131	131	131	134
People aged 75-79 predicted to have dementia	264	259	247	235	235
People aged 80-84 predicted to have dementia	323	345	389	411	411
People aged 85-89 predicted to have dementia	328	328	343	363	383
People aged 90 and over predicted to have dementia	377	377	401	401	401
Total Population Aged 65 and Over Predicted to have Dementia	1,501	1,523	1,597	1,630	1,655

11. Living alone

These figures show an increase of 519 people aged 65 and over to be living alone by 2029, otherwise expressed as a near 7.9% increase on current levels.

	2025	2026	2027	2028	2029
Males aged 65-69 predicted to live alone	455	475	495	515	535
Males aged 70-74 predicted to live alone	382	402	402	402	402

Males aged 75-79 predicted to live alone	430	409	387	366	366
Males aged 80-84 predicted to live alone	305	330	381	406	406
Males aged 85-99 predicted to live alone	226	226	258	258	258
Males aged 90+ predicted to live alone	170	170	213	213	213
Females aged 65-69 predicted to live alone	632	632	656	680	680
Females aged 70-74 predicted to live alone	679	679	679	679	708
Females aged 75-79 predicted to live alone	893	893	856	818	818
Females aged 80-84 predicted to live alone	813	860	956	1,004	1,004
Females aged 85-99 predicted to live alone	622	622	622	678	735
Females aged 90+ predicted to live alone	450	450	450	450	450
Total population aged 65 and over predicted to live alone	6,056	6,147	6,354	6,469	6,575

12. Hospital admissions from falls

These figures show an increase of 91 people likely to require hospital admission as a result of falls by 2029, representing a 12.4% increase.

	2025	2026	2027	2028	2029
People aged 65-69 predicted numbers of hospital admissions due to falls	44	45	47	47	49
People aged 70-74 predicted numbers of hospital admissions due to falls	60	60	61	61	63
People aged 75-79 predicted numbers of hospital admissions due to falls	105	103	96	93	93
People aged 80 and over predicted numbers of hospital admissions due to falls	431	460	489	511	525
Total population aged 65 and over predicted numbers of hospital admissions due to falls	640	667	693	713	731

13. Mobility tasks

These figures show that there are likely to be a further 321 residents aged 65 and over unable to undertake on basic task themselves due to mobility issues by 2029, representing an increase of 7.8%. Such basis tasks (although not exhaustive) can 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; and
- getting in and out of bed

	2025	2026	2027	2028	2029
People aged 65-69 unable to manage at least one activity on their own	418	426	443	460	468
People aged 70-74 unable to manage at least one activity on their own	558	568	568	568	584
People aged 75-79 unable to manage at least one activity on their own	744	732	699	666	666
People aged 80-84 unable to manage at least one activity on their own	709	756	850	897	897
People aged 85 and over unable to manage at least one activity on their own	1,370	1,370	1,370	1,455	1,505
Total Population aged 65+ Unable to Manage at Least One Activity on Their Own	3,799	3,852	3,930	4,046	4,120

14. Self-care activity

These figures show that that by 2029 an additional 453 people aged 65 and over will need help with at least one self-care activity, representing a growth of 7.7%. Such self-care activities relate to personal care and mobility (although not exhaustive) can include:

- Having a bath or shower;
- Using the toilet;
- Getting up and down stairs;
- Getting around indoors;
- Dressing or undressing;
- Getting in and out of bed;
- Washing face and hands;
- Eating, including cutting up food; and
- Taking medicine.

	2025	2026	2027	2028	2029
Males aged 65-69 who need help with at least one self-care activity	382	398	415	432	448
Males aged 70-74 who need help with at least one self-care activity	376	396	396	396	396
Males aged 75-79 who need help with at least one self-care activity	506	481	455	430	430
Males aged 80+ who need help with at least one self-care activity	898	935	1,010	1,085	1,085
Females aged 65-69 who need help with at least one self-care activity	484	484	502	521	521
Females aged 70-74 who need help with at least one self-care activity	515	515	515	515	538

Females aged 75-79 who need help with at least one self-care activity	715	715	685	656	656
Females aged 80+ who need help with at least one self-care activity	1,534	1,576	1,661	1,747	1,789
Total Population Aged 65+ who need help with at least one self-care activity	5,409	5,500	5,640	5,781	5,862
Males aged 65-69 with unmet need for at least one self-care activity	327	341	355	369	383
Males aged 70-74 with unmet need for at least one self-care activity	283	298	298	298	298
Males aged 75-79 with unmet need for at least one self-care activity	468	445	421	398	398
Males aged 80 and over with unmet need for at least one self-care activity	806	840	907	974	974
Females aged 65-69 with unmet need for at least one self-care activity	377	377	392	406	406
Females aged 70-74 with unmet need for at least one self-care activity	442	442	442	442	461
Females aged 75-79 with unmet need for at least one self-care activity	590	590	566	541	541
Females aged 80 and over with unmet need for at least one self-care activity	1,397	1,436	1,513	1,591	1,630
Total population aged 65 and over with unmet need for at least one self-care activity	4,690	4,768	4,894	5,019	5,091

15. Domestic tasks

These figures show that that by 2029 an additional 511 people aged 65 and over will need help with at least one domestic task, representing a growth of 8.7%. Such domestic tasks relate to activities which are fundamental to living independently and (although not exhaustive) can include:

- Doing routine housework or laundry;
- Shopping for food;
- Getting out of the house; and
- Doing paperwork or paying bills

	2025	2026	2027	2028	2029
Males aged 65-69 who need help with at least one domestic task	306	319	333	346	359
Males aged 70-74 who need help with at least one domestic task	323	340	340	340	340
Males aged 75-79 who need help with at least one domestic task	376	357	338	320	320
Males aged 80+ who need help with at least one domestic task	890	928	1,002	1,076	1,076

Females aged 65-69 who need help with at least one domestic task	528	528	548	568	568
Females aged 70-74 who need help with at least one domestic task	481	481	481	481	502
Females aged 75-79 who need help with at least one domestic task	658	658	630	603	603
Females aged 80+ who need help with at least one domestic task	1,829	1,880	1,981	2,083	2,134
Total Population Aged 65+ who Need Help with at Least One Domestic Task	5,390	5,490	5,653	5,816	5,901
Males aged 65-69 with unmet need for at least one domestic task	179	187	195	203	211
Males aged 70-74 with unmet need for at least one domestic task	232	244	244	244	244
Males aged 75-79 with unmet need for at least one domestic task	232	220	209	197	197
Males aged 80 and over with unmet need for at least one domestic task	533	555	599	644	644
Females aged 65-69 with unmet need for at least one domestic task	294	294	305	316	316
Females aged 70-74 with unmet need for at least one domestic task	283	283	283	283	295
Females aged 75-79 with unmet need for at least one domestic task	370	370	354	339	339
Females aged 80 and over with unmet need for at least one domestic task	997	1,025	1,080	1,136	1,163
Total population aged 65 and over with unmet need for at least one domestic task	3,120	3,178	3,270	3,362	3,409

16. Limiting long-term illness

These figures are split between those who will be affected to a small degree but a long-term illness, and those who will be affected a lot. There is a growth of 281 for those affected slightly (a 7.8% change), compared with 265 for those affected a lot (a 9.1% change).

	2025	2026	2027	2028	2029
People aged 65-74 whose day-to-day activities are limited a little	1,222	1,236	1,276	1,290	1,330
People aged 75-84 whose day-to-day activities are limited a little	1,430	1,469	1,469	1,489	1,489
People aged 85 and over whose day-to-day activities are limited a little	689	712	735	758	804
Total Population Aged 65+ with a Limiting Long-Term Illness	3,341	3,417	3,480	3,536	3,622

whose Day-To-Day Activities are Limited a Little					
People aged 65-74 whose day-to-day activities are limited a lot	696	703	726	734	757
People aged 75-84 whose day-to-day activities are limited a lot	989	1,016	1,016	1,029	1,029
People aged 85 and over whose day-to-day activities are limited a lot	979	1,012	1,044	1,077	1,142
Total Population Aged 65+ with a Limiting Long-Term Illness whose Day-To-Day Activities are Limited a Lot	2,663	2,731	2,786	2,840	2,928

Appendix 2

Extra care/Close care provision

(source: <https://housingcare.org>)

Search: (5 facilities) Housing (extra, close), Building (all types, all sizes, all tenures) or Home (none) in England, Surrey, Tandridge with Stay Type (all)

Ordered By: Facility Name.

View these results online at <https://housingcare.org>

Results...

AUDLEY LINGFIELD GRANGE

St. Piers Lane, Lingfield, Surrey, RH7 6PW. [View on a map](#)



Enquiries to: Audley Villages

Telephone: 0800 093 8181

Email: info@audleyvillages.co.uk

Type(s): EXTRA CARE HOUSING

Properties: 152 flats. Built in 2026. Sizes 1 bedroom, 2 bedroom.

Tenure: Tenure(s): Leasehold

Facilities: Lift, Lounge, Restaurant open to the public, Guest facilities, Garden

Web link: <https://housingcare.org/housing-care/facility-info-165560-audley-lingfield-grange-lingfield-england>

CHARTERS VILLAGE

Felcourt Road, East Grinstead, West Sussex, RH19 2JG. [View on a map](#)



Enquiries to: Retirement Villages Group Ltd

Telephone: 01372 383 950

Email: info@retirementvillages.co.uk

Type(s): RETIREMENT HOUSING / CLOSE CARE HOUSING

Properties: 88 flats, bungalows. Built in 2012.

Tenure: Tenure(s): Leasehold and Rent (market)

Facilities: Lounge, Dining room, Guest facilities, Garden, Conservatory, Activities room, Bar/pub, Clubhouse

Web link: <https://housingcare.org/housing-care/facility-info-159750-charters-village-east-grinstead-england>

DAVID GRESHAM HOUSE

2 Oak Close, Hurst Green, Oxted, Surrey, RH8 0BA. [View on a map](#)



Enquiries to: Abbeyfield Wey Valley Society Ltd

Telephone: Not available

Email: marketing@awvs.org.uk

Type(s): RETIREMENT HOUSING / CLOSE CARE HOUSING

Properties: 5 flats. Built in 1986. Sizes 1 bedroom. Includes mobility and wheelchair standard properties.

Tenure: Tenure(s): Rent (social landlord)

Facilities: Lift, Lounge, Dining room, Laundry, Guest facilities, Garden, Conservatory, Shop, Hairdressing salon, Library, Assisted bathing facility

Web link: <https://housingcare.org/housing-care/facility-info-36218-david-gresham-house-hurst-green-england>

FORTHCOMING DEVELOPMENT

East Grinstead Road, Lingfield, Surrey, RH7 6ET. [View on a map](#)



Enquiries to: Anchor

Telephone: 0800 251 1609

Email: contact@anchor.org.uk

Type(s): EXTRA CARE HOUSING

Properties: 45 flats. Due in 2028. Sizes 1 bedroom, 2 bedroom.

Tenure: Tenure(s): Rent (social landlord) and Shared Ownership (OPSO)

Facilities: Lift, Lounge, Garden

Web link: <https://housingcare.org/housing-care/facility-info-165478-forthcoming-development-lingfield-england>

THE CLOISTER FLATS

College of St Barnabas, Blackberry Lane, Lingfield, Surrey, RH7 6NJ. [View on a map](#)



Enquiries to: College of St Barnabas

Telephone: 01342 870 260

Email: enquiries@collegeofstbarnabas.com

Type(s): RETIREMENT HOUSING / CLOSE CARE HOUSING

Properties: 28 flats. Built in 1901 and renovated in 2017. Sizes studio, 1 bedroom.

Tenure: Tenure(s): Licence

Facilities: Lounge, Dining room, Garden, Library, Refectory, 2 libraries, croquet lawn, 9 hole putting green, 2 chapels

Web link: <https://housingcare.org/housing-care/facility-info-158126-the-cloister-flats-lingfield-england>

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Appendix 3

Personal care provision

(source: <https://housingcare.org>)

Search: (11 facilities) Housing (none) or Home (care), Room (all types) in England, Surrey, Tandridge with Stay Type (all)
Ordered By: Facility Name.

[View these results online at https://housingcare.org](https://housingcare.org)

Results...

BURNTWOOD LODGE

84 Burntwood Lane, Caterham, Surrey CR3 6TA. [View on a map](#)



Enquiries to: Mark Peter Fuller and Joy Carolyn Fuller

Telephone: 01883 818085

Email: care@burntwoodlodge.co.uk

Type(s): CARE HOME

Properties: This home accommodates 6 residents in 6 single rooms (1 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-148899-burntwood-lodge-caterham-england>

CHAMPIONS PLACE

Kent Hatch Road, Limpsfield, Oxted, Surrey RH8 0TA. [View on a map](#)



Enquiries to: R & G Sparkes Limited

Telephone: 01883 722006/ 732343

Email: sandrahayworth@btconnect.com

Type(s): CARE HOME

Properties: This home accommodates 14 residents.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124663-champions-place-limpsfield-england>

CHARTERS COURT NURSING & RESIDENTIAL HOME

Charters Towers, Felcourt Road, East Grinstead, West Sussex RH19 2JG. [View on a map](#)



Enquiries to: HC-One

Telephone: 0333 999 8743

Email: careenquiries@hc-one.co.uk

Type(s): CARE HOME / CARE HOME WITH NURSING

Properties: This home accommodates 60 residents in 60 single rooms (60 en suite). It was purpose built in 2017 and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-161249-charters-court-nursing-residential-home-east-grinstead-england>

CHERRY LODGE REST HOME

75 Whyteleafe Road, Caterham, Surrey CR3 5EJ. [View on a map](#)



Enquiries to: Cherry Lodge Rest Home Limited

Telephone: 01883 341471

Email: enquiries@cherry-lodge.net

Type(s): CARE HOME

Properties: This home accommodates 19 residents in 13 single and 3 shared rooms (16 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124666-cherry-lodge-rest-home-caterham-england>

DAVID GRESHAM HOUSE

2 Oak Close, Hurst Green, Oxted, Surrey RH8 0BA. [View on a map](#)



Enquiries to: Abbeyfield North Downs Society Ltd

Telephone: 01252 735 507

Email: marketing@awvs.org.uk

Type(s): CARE HOME

Properties: This home accommodates 29 residents in 29 single rooms (29 en suite). It was purpose built and has a garden. Facilities are available for family or friends to stay overnight.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124634-david-gresham-house-hurst-green-england>

ELIZABETH COURT

Grenadier Place, Caterham, Surrey CR3 5YJ. [View on a map](#)



Enquiries to: Anchor

Telephone: 01883 331590

Email: care.enquiries@anchor.org.uk

Type(s): CARE HOME

Properties: This home accommodates 59 residents in 59 single rooms (59 en suite). It was purpose built and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-157321-elizabeth-court-caterham-england>

LONGMEAD HOUSE

1 Buxton Lane, Caterham, Surrey CR3 5HG. [View on a map](#)



Enquiries to: Bridget Catherina McAleese

Telephone: 01883 340686

Type(s): CARE HOME

Properties: This home accommodates 23 residents.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124635-longmead-house-caterham-england>

OAKLEIGH

Evelyn Gardens, Godstone, Surrey RH9 8BD. [View on a map](#)



Enquiries to: Anchor

Telephone: 0800 085 4214

Email: care.enquiries@anchor.org.uk

Type(s): CARE HOME

Properties: This home accommodates 51 residents in 51 single rooms (51 en suite). It was purpose built in 2002 and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-155315-oakleigh-godstone-england>

RIDGEWAY MANOR

Barrow Green Road, Oxted, Surrey RH8 9HE. [View on a map](#)



Enquiries to: C.N.V. Limited

Telephone: 01883 717055

Email: janet.browne@cnvcare.co.uk

Type(s): CARE HOME

Properties: This home accommodates 43 residents in 43 single rooms (22 en suite).

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124645-ridgeway-manor-oxted-england>

TANDRIDGE HEIGHTS MEMORIAL CARE HOME

Memorial Close, Oxted, Surrey RH8 0NH. [View on a map](#)



Enquiries to: Barchester Healthcare Ltd

Telephone: 01883 715 595

Email: tandridge@barchester.com

Type(s): CARE HOME / CARE HOME WITH NURSING

Properties: This home accommodates 75 residents in 75 single rooms (75 en suite). It was purpose built and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-157034-tandridge-heights-memorial-care-home-oxted-england>

WOLFE HOUSE CARE HOME

Wolf's Row, Limpsfield, Oxted, Surrey RH8 0EB. [View on a map](#)



Enquiries to: Wolfe House Limited

Telephone: 01883 716 627

Email: enquiries@wolfehouse.co.uk

Type(s): CARE HOME

Properties: This home accommodates 16 residents in 12 single and 1 shared rooms (3 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124648-wolfe-house-care-home-limpsfield-england>

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Appendix 4

Nursing care provision

(source: <https://housingcare.org>)

Search: (13 facilities) Housing (none) or Home (nursing), Room (all types) in England, Surrey, Tandridge with Stay Type (all)
Ordered By: Facility Name.

View these results online at <https://housingcare.org>

Results...

BUXTON LODGE CARE HOME

53 Buxton Lane, Caterham on the Hill, Surrey CR3 5HL. [View on a map](#)



Enquiries to: New Century Care Limited

Telephone: 01883 410 976

Email: buxtonlodge@newcenturycare.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 44 residents in 32 single and 3 shared rooms (18 en suite). It is a converted building with a garden. Overnight visitors can usually be accommodated.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136432-buxton-lodge-care-home-caterham-england>

CHARTERS COURT NURSING & RESIDENTIAL HOME

Charters Towers, Felcourt Road, East Grinstead, West Sussex RH19 2JG. [View on a map](#)



Enquiries to: HC-One

Telephone: 0333 999 8743

Email: careenquiries@hc-one.co.uk

Type(s): CARE HOME / CARE HOME WITH NURSING

Properties: This home accommodates 60 residents in 60 single rooms (60 en suite). It was purpose built in 2017 and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-161249-charters-court-nursing-residential-home-east-grinstead-england>

COLLEGE OF ST. BARNABAS

Blackberry Lane, Lingfield, Surrey RH7 6NJ. [View on a map](#)



Enquiries to: College of St Barnabas

Telephone: 01342 870 260

Email: enquiries@collegeofstbarnabas.com

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 28 residents in 9 single rooms. Facilities are available for family or friends to stay overnight.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136439-college-of-st-barnabas-lingfield-england>

COOMBE DINGLE

14 Queens Park Road, Caterham, Surrey CR3 5RB. [View on a map](#)



Enquiries to: Alpha Care (Caterham) Limited

Telephone: 01883 345993

Email: info@alphacareltd.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 35 residents in 28 single and 7 shared rooms (11 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136443-coombe-dingle-caterham-england>

CRANMER COURT

Farleigh Road, Farleigh Common, Warlingham, Surrey CR6 9PE. [View on a map](#)



Enquiries to: Aria Care

Telephone: 0808 223 5421

Email: ariahealthcare@trustedcare.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 62 residents in 56 single rooms (56 en suite). It was purpose built and has a garden. Overnight visitors can usually be accommodated.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136469-cranmer-court-warlingham-england>

GLEBE HOUSE

Church Lane, Chaldon, Caterham, Surrey CR3 5AL. [View on a map](#)



Enquiries to: Glebe Care Ltd

Telephone: 01883 344434

Email: info@glebe-house.com

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 43 residents in 33 single and 4 shared rooms (25 en suite). It is a converted building with a garden. Overnight visitors can usually be accommodated.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136458-glebe-house-chaldon-england>

GREATHED MANOR NURSING HOME

Ford Manor Road, Dormansland, Lingfield, Surrey RH7 6PA. [View on a map](#)



Enquiries to: Pressbeau Ltd

Telephone: 01342 832577 - 01342 836 478

Email: greathed@pressbeau.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 40 residents in 23 single rooms (23 en suite). It was purpose built in 2009 and has a garden. Facilities are available for family or friends to stay overnight.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-157999-greathed-manor-nursing-home-dormansland-england>

HEATHERLEY CHESHIRE HOME

Effingham Lane, Copthorne, Crawley, Surrey RH10 3HS. [View on a map](#)



Enquiries to: Leonard Cheshire

Telephone: 01342 712 232

Email: info@leonardcheshire.org

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 39 residents in 40 single rooms (6 en suite). It is a converted building with a garden. Overnight visitors can usually be accommodated.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-146586-heatherley-cheshire-home-copthorne-england>

OAKHURST COURT NURSING HOME

Tilburstow Hill Road, South Godstone, Godstone, Surrey RH9 8JY. [View on a map](#)



Enquiries to: ADL plc

Telephone: 01342 893 043

Email: info@oakhurstcourt.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 57 residents in 47 single and 4 shared rooms (43 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136472-oakhurst-court-nursing-home-south-godstone-england>

TANDRIDGE HEIGHTS MEMORIAL CARE HOME

Memorial Close, Oxted, Surrey RH8 0NH. [View on a map](#)



Enquiries to: Barchester Healthcare Ltd

Telephone: 01883 715 595

Email: tandridge@barchester.com

Type(s): CARE HOME / CARE HOME WITH NURSING

Properties: This home accommodates 75 residents in 75 single rooms (75 en suite). It was purpose built and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-157034-tandridge-heights-memorial-care-home-oxted-england>

TUPWOOD GATE NURSING HOME

74 Tupwood Lane, Caterham, Surrey CR3 6YE. [View on a map](#)



Enquiries to: Cygnet Health Care plc

Telephone: 01883 342275

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 35 residents in 25 single and 4 shared rooms (24 en suite). Facilities are available for family or friends to stay overnight.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136556-tupwood-gate-nursing-home-caterham-england>

WINDMILL MANOR CARE HOME

2 Fairviews, Off Holland Road, Hurst Green, Oxted, Surrey RH8 9BD. [View on a map](#)



Enquiries to: Barchester Healthcare Ltd

Telephone: 01883 718 120

Email: windmillmanor@barchester.com

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 60 residents in 60 single rooms (60 en suite). It was purpose built in 2010 and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-158602-windmill-manor-care-home-oxted-england>

WOODSIDE VIEW

2 Highview, Caterham, Surrey CR3 6AY. [View on a map](#)



Enquiries to: Care Homes of Distinction Ltd

Telephone: 01883 346313

Email: info@carehomesofdistinction.com

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 26 residents in 20 single and 2 shared rooms (11 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136561-woodside-view-caterham-england>

HousingCare

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Appendix 5

Single occupancy en suite care bed provision

(source: <https://housingcare.org>)

Search: (20 facilities) Housing (none) or Home (care, nursing), Room () in England, Surrey, Tandridge with Stay Type (all)
Ordered By: Facility Name.

View these results online at <https://housingcare.org>

Results...

BURNTWOOD LODGE

84 Burntwood Lane, Caterham, Surrey CR3 6TA. [View on a map](#)



Enquiries to: Mark Peter Fuller and Joy Carolyn Fuller

Telephone: 01883 818085

Email: care@burntwoodlodge.co.uk

Type(s): CARE HOME

Properties: This home accommodates 6 residents in 6 single rooms (1 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-148899-burntwood-lodge-caterham-england>

BUXTON LODGE CARE HOME

53 Buxton Lane, Caterham on the Hill, Surrey CR3 5HL. [View on a map](#)



Enquiries to: New Century Care Limited

Telephone: 01883 410 976

Email: buxtonlodge@newcenturycare.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 44 residents in 32 single and 3 shared rooms (18 en suite). It is a converted building with a garden. Overnight visitors can usually be accommodated.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136432-buxton-lodge-care-home-caterham-england>

CHARTERS COURT NURSING & RESIDENTIAL HOME

Charters Towers, Felcourt Road, East Grinstead, West Sussex RH19 2JG. [View on a map](#)



Enquiries to: HC-One

Telephone: 0333 999 8743

Email: careenquiries@hc-one.co.uk

Type(s): CARE HOME / CARE HOME WITH NURSING

Properties: This home accommodates 60 residents in 60 single rooms (60 en suite). It was purpose built in 2017 and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-161249-charters-court-nursing-residential-home-east-grinstead-england>

CHERRY LODGE REST HOME

75 Whyteleafe Road, Caterham, Surrey CR3 5EJ. [View on a map](#)



Enquiries to: Cherry Lodge Rest Home Limited

Telephone: 01883 341471

Email: enquiries@cherry-lodge.net

Type(s): CARE HOME

Properties: This home accommodates 19 residents in 13 single and 3 shared rooms (16 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124666-cherry-lodge-rest-home-caterham-england>

COLLEGE OF ST. BARNABAS

Blackberry Lane, Lingfield, Surrey RH7 6NJ. [View on a map](#)



Enquiries to: College of St Barnabas

Telephone: 01342 870 260

Email: enquiries@collegeofstbarnabas.com

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 28 residents in 9 single rooms. Facilities are available for family or friends to stay overnight.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136439-college-of-st-barnabas-lingfield-england>

COOMBE DINGLE

14 Queens Park Road, Caterham, Surrey CR3 5RB. [View on a map](#)



Enquiries to: Alpha Care (Caterham) Limited

Telephone: 01883 345993

Email: info@alphacareltd.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 35 residents in 28 single and 7 shared rooms (11 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136443-coombe-dingle-caterham-england>

CRANMER COURT

Farleigh Road, Farleigh Common, Warlingham, Surrey CR6 9PE. [View on a map](#)



Enquiries to: Aria Care

Telephone: 0808 223 5421

Email: ariahealthcare@trustedcare.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 62 residents in 56 single rooms (56 en suite). It was purpose built and has a garden. Overnight visitors can usually be accommodated.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136469-cranmer-court-warlingham-england>

DAVID GRESHAM HOUSE

2 Oak Close, Hurst Green, Oxted, Surrey RH8 0BA. [View on a map](#)



Enquiries to: Abbeyfield North Downs Society Ltd

Telephone: 01252 735 507

Email: marketing@awvs.org.uk

Type(s): CARE HOME

Properties: This home accommodates 29 residents in 29 single rooms (29 en suite). It was purpose built and has a garden. Facilities are available for family or friends to stay overnight.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124634-david-gresham-house-hurst-green-england>

ELIZABETH COURT

Grenadier Place, Caterham, Surrey CR3 5YJ. [View on a map](#)



Enquiries to: Anchor

Telephone: 01883 331590

Email: care.enquiries@anchor.org.uk

Type(s): CARE HOME

Properties: This home accommodates 59 residents in 59 single rooms (59 en suite). It was purpose built and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-157321-elizabeth-court-caterham-england>

GLEBE HOUSE

Church Lane, Chaldon, Caterham, Surrey CR3 5AL. [View on a map](#)



Enquiries to: Glebe Care Ltd

Telephone: 01883 344434

Email: info@glebe-house.com

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 43 residents in 33 single and 4 shared rooms (25 en suite). It is a converted building with a garden. Overnight visitors can usually be accommodated.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136458-glebe-house-chaldon-england>

GREATHED MANOR NURSING HOME

Ford Manor Road, Dormansland, Lingfield, Surrey RH7 6PA. [View on a map](#)



Enquiries to: Pressbeau Ltd

Telephone: 01342 832577 - 01342 836 478

Email: greathed@pressbeau.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 40 residents in 23 single rooms (23 en suite). It was purpose built in 2009 and has a garden. Facilities are available for family or friends to stay overnight.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-157999-greathed-manor-nursing-home-dormansland-england>

HEATHERLEY CHESHIRE HOME

Effingham Lane, Copthorne, Crawley, Surrey RH10 3HS. [View on a map](#)



Enquiries to: Leonard Cheshire

Telephone: 01342 712 232

Email: info@leonardcheshire.org

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 39 residents in 40 single rooms (6 en suite). It is a converted building with a garden. Overnight visitors can usually be accommodated.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-146586-heatherley-cheshire-home-copthorne-england>

OAKHURST COURT NURSING HOME

Tilburstow Hill Road, South Godstone, Godstone, Surrey RH9 8JY. [View on a map](#)



Enquiries to: ADL plc

Telephone: 01342 893 043

Email: info@oakhurstcourt.co.uk

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 57 residents in 47 single and 4 shared rooms (43 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136472-oakhurst-court-nursing-home-south-godstone-england>

OAKLEIGH

Evelyn Gardens, Godstone, Surrey RH9 8BD. [View on a map](#)



Enquiries to: Anchor

Telephone: 0800 085 4214

Email: care.enquiries@anchor.org.uk

Type(s): CARE HOME

Properties: This home accommodates 51 residents in 51 single rooms (51 en suite). It was purpose built in 2002 and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-155315-oakleigh-godstone-england>

RIDGEWAY MANOR

Barrow Green Road, Oxted, Surrey RH8 9HE. [View on a map](#)



Enquiries to: C.N.V. Limited

Telephone: 01883 717055

Email: janet.browne@cnvcare.co.uk

Type(s): CARE HOME

Properties: This home accommodates 43 residents in 43 single rooms (22 en suite).

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124645-ridgeway-manor-oxted-england>

TANDRIDGE HEIGHTS MEMORIAL CARE HOME

Memorial Close, Oxted, Surrey RH8 0NH. [View on a map](#)



Enquiries to: Barchester Healthcare Ltd

Telephone: 01883 715 595

Email: tandridge@barchester.com

Type(s): CARE HOME / CARE HOME WITH NURSING

Properties: This home accommodates 75 residents in 75 single rooms (75 en suite). It was purpose built and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-157034-tandridge-heights-memorial-care-home-oxted-england>

TUPWOOD GATE NURSING HOME

74 Tupwood Lane, Caterham, Surrey CR3 6YE. [View on a map](#)



Enquiries to: Cygnet Health Care plc

Telephone: 01883 342275

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 35 residents in 25 single and 4 shared rooms (24 en suite). Facilities are available for family or friends to stay overnight.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136556-tupwood-gate-nursing-home-caterham-england>

WINDMILL MANOR CARE HOME

2 Fairviews, Off Holland Road, Hurst Green, Oxted, Surrey RH8 9BD. [View on a map](#)



Enquiries to: Barchester Healthcare Ltd

Telephone: 01883 718 120

Email: windmillmanor@barchester.com

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 60 residents in 60 single rooms (60 en suite). It was purpose built in 2010 and has a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-158602-windmill-manor-care-home-oxted-england>

WOLFE HOUSE CARE HOME

Wolf's Row, Limpsfield, Oxted, Surrey RH8 0EB. [View on a map](#)



Enquiries to: Wolfe House Limited

Telephone: 01883 716 627

Email: enquiries@wolfehouse.co.uk

Type(s): CARE HOME

Properties: This home accommodates 16 residents in 12 single and 1 shared rooms (3 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-124648-wolfe-house-care-home-limpsfield-england>

WOODSIDE VIEW

2 Highview, Caterham, Surrey CR3 6AY. [View on a map](#)



Enquiries to: Care Homes of Distinction Ltd

Telephone: 01883 346313

Email: info@carehomesofdistinction.com

Type(s): CARE HOME WITH NURSING

Properties: This home accommodates 26 residents in 20 single and 2 shared rooms (11 en suite). It is a converted building with a garden.

Tenure: Licence

Web link: <https://housingcare.org/housing-care/facility-info-136561-woodside-view-caterham-england>

HousingCare

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Appendix IW2

Relevant extra care appeal summaries

Scale of need for specialist housing

Site	Date	Pins ref:	Nature of scheme	Weighting
Land to the rear of 237-259 London Road, West Malling	19/12/2018	APP/H2265/W/18/3202040	79 extra care units	Substantial weight
Beechmoor Garden Centre, Whitchurch Road, Great Boughton	17/07/2019	APP/A0665/W/18/3203413	110 extra care units	Very substantial weight and/or significant weight
Land to the east of Reading Road, Lower Shiplake	14/10/2019	APP/Q3115/W/19/3220425	65 extra care units	Significant weight
Land to the rear of Burston Garden Centre North Orbital Road, Chiswell Green	09/01/2020 31/01/2022	APP/B1930/W/19/3235642 & APP/B1930/W/21/3279463	64 bed care home and 125 extra care units 124 extra care units	Substantial weight Very substantial weight
Homebase Site, New Zealand Avenue, Walton on Thames	21/06/2021	APP/K3605/W/20/3263347	222 extra care units	Considerable weight
Little Sparrows, Sonning Common	25/06/2021	APP/Q3115/W/20/3265861	266 extra care units	Significant weight
Homebase Site, Pines Way, Bath	02/09/2021	APP/F0114/W/21/3268794	Extra care units	Substantial weight
Royal Cambridge Home, 82-84 Hurst Road, East Molesey	18/10/2021	APP/K3605/W/20/3257109	32 bed care home and 60 extra care units	Substantial weight
Kent & Surrey Golf Club, Crouch House Road, Edenbridge	02/11/2021	APP/G2245/W/21/3271595	Extra care units	Very significant weight
163-187 High St, Bottisham	07/04/2022 13/02/2024	APP/V0510/W/21/3282241 & APP/V0510/W/23/3324141	Extra care units	Substantial weight Very substantial weight
Land South of Arlesey Road, Stotfold	31/08/2022	APP/P0240/W/21/3289401	Extra care units	Significant weight
Land at Sandown Park, Royal Tunbridge Wells	02/09/2022	APP/M2270/W/21/3289034	180 extra care units	Positive weight
Land off Coombe Road, Norbiton	02/11/2022	APP/Z5630/W/22/3293957	128 extra care units	Substantial positive weight
Land West of Wroslyn Road, Freeland	18/01/2023	APP/D3125/W/22/3301202	160 extra care units	Significant weight
Land off Ellesmere Road, Hencote	02/03/2023	APP/L3245/W/22/3306381	75 bed care home and 164 extra care units	Substantial weight
Land to the south & east of the former Chimes Garden Centre, Nazeing	11/11/2024	APP/J1535/W/24/3342224	65 extra care units	Significant weight
Land East of Vicarage Road, Sunbury-on-Thames	22/11/2024	APP/Z3635/W/24/3342657	60 bed care home and 164 extra care units	Very substantial weight
Land South of Leighton Road, Stanbridge	24/12/2024	APP/P0240/W/24/3347529	66 bed care home and 99 extra care units	Moderate weight
Former North Hill Sawmill Yard,	04/03/2025	APP/C1760/W/23/3328784	65 bed care home or 48 extra care,	Positive weight

Baddesley Road, Chandlers Ford			and 101 extra care units	
Former Hook Estate and Kennels, Coopers Lane Road/Firs Wood Close, Northaw	25/03/2025	APP/C1950/W/24/ 3354772	Extra care units	Substantial weight

In the case of St Albans (APP/B1930/W/19/3235642) the Inspector noted at paragraph 72 that:

“In light of the current shortfall in C2 accommodation, there can be no doubt that the development could make a very significant contribution towards meeting such local needs and based on the evidence supplied, this would be likely to be achieved within the next 5 years...I thus consider the benefits relating to general and C2 housing need to be very significant which weighs substantially in favour of the development.”

This is similar to the assessment made by the Inspector for the appeal at West Malling (APP/H2265/W/18/3202040) where the Inspector concluded that based on the evidence presented to him for the appeal that:

“there is a local need for residential accommodation of this type and tenure for which the current and emerging development plan does not make adequate provision and that the development would make a significant contribution towards meeting such needs.”

When undertaking the planning balance, the Inspector gave substantial weight to the Green Belt harm. However, he concluded at paragraph 65 that:

“I accord substantial weight to the contribution that the development would make towards the need for specialist extra care housing for sale to older people which was not accurately estimated in the SHMA and for which the current and emerging development plan does not make adequate provision.”

In the case of Beechmoor Garden Centre (APP/A0665/W/18/3203413) the Inspector considered the evidence submitted for the appellant and noted at paragraph 39 that:

“While there may be some scope for error in the appellant’s figures, there is no clear evidence that they are wholly unreasonable. I also note that they relate specifically to the need for the type of facility being proposed here. There are therefore likely to be separate ‘needs’ for different types of specialist housing and care models. The presence of other care homes or existing extra care facilities does not alter the fact that further provision may be required. Furthermore, it is unlikely to be the case that other forms of housing will necessarily meet the demand the appellant has identified.”

When going on to consider the matter of weighting the Inspector commented at paragraph 40 that:

“Nevertheless, even if other housing or care models could help meet some of this need, it still seems likely that a specific need for this form of extra care housing would remain. The fact that the development would make a sizeable contribution to help meeting these demands is something to which I have attributed very substantial weight.”

When undertaking the planning balance, the harm to the green belt and encroachment into the countryside was afforded substantial weight, whilst a failure to provide affordable housing was afforded additional weight. However, at paragraph 50 the Inspector again noted that:

“I have attached significant weight to the contribution the development would make to meeting the needs for specialist housing in the area for older people and the associated social and economic benefits it would bring. I have also given substantial weight to the evidence relating to alternative available sites and the likelihood of the needs identified being met in the short to medium term by development within defined settlements.”

In the case of the Walton-on-Thames appeal (APP/K3605/W/20/3263347) the Inspector concluded at paragraph 89 that:

“in respect of future housing provision the appeal proposal would make a significant contribution to this specific area of housing need to which I give considerable weight.”

In the case of an appeal at Sonning Common (APP/Q3115/W/20/3265861) the Inspector commented at paragraph 27 that:

“Clearly the need for specialist accommodation for older people is recognised in the SOLP, which promotes the identification of suitable sites in the neighbourhood planning process and the inclusion of specialist accommodation on strategic sites, and favours specialist housing for the elderly over conventional housing on unallocated sites.”

The Inspector then went on at paragraph 31 to note:

“Plainly, when compared with Government guidance, the development plan is left wanting in terms of addressing a need for extra care. There is no reference in Policy STRAT 1 to the PPG insofar as assessing the needs of older people. There is no reference in Policy STRAT 2 to the accommodation needs of those local residents who will make up more than a quarter of the total population of South Oxfordshire by 2035. Policy H13 in the SOLP expressly deals with specialist housing for older people. It covers all forms of specialist housing for older people, but it is completely generic as

to provision. No attempt is made to differentiate between types and tenure of specialist housing for older people, nor to address the need for each.”

On the basis that the appeal scheme was major development in the AONB the relevant test was to consider whether there were exceptional circumstances to support the scheme and that the development was also in the public interest (the now paragraph 177 test of the NPPF). The Inspector undertook that assessment in detail from paragraph 107 onwards. This then fed into the planning balance from paragraph 130 onwards with the Inspector concluding at paragraph 132 that:

“the circumstances in this case are exceptional and that the grant of planning permission would be in the public interest.”

In the case of an appeal in Bath (APP/F0114/W/21/3268794) for a retirement proposal the Inspector undertook the heritage balance due to the setting of the site and concluded at paragraph 82 that:

“I am mindful of the fact that the PPG has identified that the need to provide housing for older people is ‘critical’ because their proportion of the overall population is increasing. It emphasises that offering older people a better choice of accommodation to suit their changing needs can help them live independently for longer, feel more connected to their communities and help reduce costs to the social care and health systems. Bearing this in mind, as well as the established unmet need, I give this public benefit substantial weight.”

In the case of an appeal for 60 extra care units in East Molesey (APP/K3605/W/20/3257109) the Inspector concluded at paragraph 36 that:

“Paragraph 124 of the Framework indicates decisions should support development that makes efficient use of land and I consider that this would be the case. I give the benefit of providing specialist accommodation substantial weight.”

In the case of a scheme at Stapleford (APP/W0530/W/21/3280395) the Inspector commented at paragraph 69 that:

“Government advice is that housing need alone does not amount to the very special circumstances required to justify inappropriate development within the Green Belt but, in this case, that housing need is combined with a lack of effective action to meet the need.”

He went on to comment at paragraph 73 in respect of the planning balance that:

“Overall, but particularly through the supply of extra care housing, needed but not otherwise being met, biodiversity enhancements to Green Belt land sought by local plan and national policy but not being delivered and recreational provision, sought by national policy on Green Belt land, the benefits of this proposal would clearly outweigh even the disproportionate harms to the Green Belt and its openness which would result from the scheme.”

In the case of a scheme in Bottisham (APP/V0510/W/21/3282241) the Inspector concluded at paragraph 73 that:

“due to the acute, growing, and unmet need for older persons accommodation generally, and extra care accommodation specifically, as well as the additional benefits of retirement care village on improved health for occupiers, I place substantial positive weight on the proposed use class C2 accommodation.”

On the basis of the approach from previous appeals, the matter of specialist provision should be afforded substantial weight in favour of the proposals.

Lack of alternative sites and absence of local plan policies

The matter of a plan failing to appropriately make provision for delivery was also addressed succinctly in the Sonning Common appeal, which came about only 9 months or so after the adoption of the South Oxfordshire Local Plan. In that appeal the Inspector noted at paragraph 31 that:

“when compared with Government guidance, the development plan is left wanting in terms of addressing a need for extra care. There is no reference in Policy STRAT 1 to the PPG insofar as assessing the needs of older people. There is no reference in Policy STRAT 2 to the accommodation needs of those local residents who will make up more than a quarter of the total population of South Oxfordshire by 2035. Policy H13 in the SOLP expressly deals with specialist housing for older people. It covers all forms of specialist housing for older people, but it is completely generic as to provision. No attempt is made to differentiate between types and tenure of specialist housing for older people, nor to address the need for each. The needs of all older people are simply lumped together. Nor is there any engagement with the market constraints and viability considerations relating to specialist accommodation for older people...”

Given that the Council’s emerging plan was withdrawn following examination and only sought to allocate a single site that was capable of delivering 25 extra care units there is no argument to indicate that a future plan will identify or allocate sufficient sites to deliver specialist

accommodation such that the development plan will remain inadequate to meet future demands.

Health and wellbeing benefits

The role of extra care housing in meeting the healthcare and wellbeing needs of older people, whilst also delivering a saving on the NHS/Social care bill for authorities cannot be underestimated. As opposed to creating a financial burden from the concentration of older people in certain locations, research indicates that schemes result in wider savings as set out above.

In the context of an appeal in West Malling the Inspector noted at paragraph 43 that:

"I acknowledge the Appellant's evidence, which the Council does not dispute, that the development would be likely to provide health and well-being benefits including: the care package; monitoring of the residents' well-being; facilities to encourage activity and mobility; and reduced isolation. The on-site support would be likely to reduce the need for residents to make use of primary health care services or social services as well as relieving pressure on hospital bed-spaces. Whilst local residents report current pressures on GP services in West Malling, the Appellant's evidence suggests that such pressures are to be addressed as part of new provision of services at Kings Hill, whether or not the appeal proposal goes ahead."

The Inspector then went on to state at paragraph 66 that:

"I accord significant weight to the health and well-being benefits for the future occupiers of the development."

In a later appeal for a scheme at Lower Shiplake the Inspector noted at paragraph 59 that:

"In terms of the benefits that derive from the provision of extra care housing these are not significantly challenged. There would be an advantage to the future residents of the development as the specialist housing would provide for a range of lifestyle facilities for social, cultural, educational and recreational activity. There is access to a range of services and care that can respond flexibly to the needs of the residents. There are advantages to health providers as the care needs of residents can be changed dependant on circumstances which can facilitate earlier discharge from hospitals as support in the home can be easily organised, this has obvious cost advantages. Care provision at this point can also reduce the need for admissions to hospital and other pressures on GP and A&E services...Given the reasonable scale of this development I give these benefits derived from the occupation of this development significant weight."

In the context of the Sonning Common appeal, the Inspector there commented at paragraph 112 that:

"the health and well-being benefits of the appeal proposal should also be recognised and given significant weight. Such benefits to elderly people are entirely obvious. I accept that such health and care benefits apply and also that they are separate from housing delivery. The benefits specialist housing for older people can bring include addressing concerns about suitable supervision, frailty, care, assistance, recreation, loneliness and isolation."

In the context of the St Albans appeal case the inspector noted at paragraph 70 that:

"The previous Inspector gave substantial weight to health and well-being benefits and the parties both maintain this same weighting. A number of documents have been provided with this appeal setting out the various benefits of specialist extra care accommodation. This includes supporting the physical and mental health of residents, providing independence for longer, and reducing financial and resource burdens on the health system. All of these benefits can be achieved with this development and so I concur that substantial weight can be given to this consideration."

In a more recent case of a scheme in Bottisham [CD x/x] the Inspector considered the matter of need and health/well-being in the round and concluded at paragraph 73 that:

"Overall, due to the acute, growing, and unmet need for older persons accommodation generally, and extra care accommodation specifically, as well as the additional benefits of retirement care village on improved health for occupiers, I place substantial positive weight on the proposed use class C2 accommodation."

The matter of health and wellbeing benefits is therefore capable of being afforded significant weight in the overall planning balance.

Freeing up of family housing

In the context of the West Malling appeal the Inspector noted at paragraph 42 that:

"As the Government has recognised in paragraphs 4.42 to 4.44 of the White Paper 'Fixing our broken housing market', helping older people to move at the right time and in the right way can help their quality of life as well as freeing up more homes for other buyers. Under-occupied homes could then be released onto the market where they would be particularly attractive to those in younger age groups in need of larger houses to raise families. The provision of specialist housing more suited to the needs of older

persons is likely to encourage them to move and would make a valuable contribution to overall housing needs which should be weighed in the balance."

When considering the balance, the Inspector concluded at paragraph 64 that:

"I accord significant weight to...the likely consequential release on to the market of family housing as older residents move to the proposed development."

In the Lower Shiplake appeal the Inspector concluded at paragraph 80 that:

"The benefits associated with the scheme are substantial, including the consequent benefits of freeing up under occupied properties..."

In the Sonning Common appeal the Inspector commented at paragraph 111 that

"it is important to recognise the fact that extra care accommodation, together with all other forms of specialist housing for older people can assist in 'freeing up' existing family and other housing by allowing them to 'right size' by moving to more appropriate accommodation. This type of specialist housing could significantly contribute towards the easing of the present housing crisis in this District where under occupancy amongst older households is greater than for England as a whole. The sale of the 133 units in the appeal proposals would release 133 family houses of three bedrooms or more. The appeal scheme would be likely to free up 39 family dwellings locally but it could be as high as 64. Significant weight can be given to this."

In the Lower Shiplake appeal the Inspector concluded at paragraph 80 that:

"The benefits associated with the scheme are substantial, including the consequent benefits of freeing up under occupied properties..."

In the St Albans appeal the inspector concluded at paragraph 71 that:

"It is accepted that the provision of specialist accommodation for the elderly can free up other parts of the housing market including family-sized dwellings. This benefits other people on the property ladder. The previous Inspector acknowledged this benefit as part of her finding of substantial weight in favour of addressing general and specialist housing needs."

In the Bottisham appeal the inspector stated at paragraph 74 that:

"It is not possible at this stage to precisely predict the number of future occupiers of the proposed use class C2 accommodation that would come from current occupiers of these homes, but there would undoubtedly be some, and potentially a high proportion of the future occupiers would be drawn from this pool. The release of some of these

family-sized homes would benefit other demographics in the housing market, and the overall fluidity of the market. I place significant weight on this benefit."

It is also relevant to note the County Councils Network 'Planning for Retirement: How Retirement Communities can help meet the needs of the ageing population' (June 2020) states:

"As Retirement Community housing frees up larger houses (each move to a one bedroom apartment in a Retirement Community frees up on average 2.25 bedrooms elsewhere), enables a whole sequence of further moves down the chain." The release of under-occupied housing freeing up the housing chain, would reduce surplus bedrooms, allowing households to live in suitable accommodation to meet their needs and which would generate revenues in the form of stamp duty land tax.

On the basis of the approach from previous appeals, and the recognition of such benefits within the NPPG, the matter of freeing up under occupied family housing is similarly capable of being afforded significant weight in favour of the proposals.

Employment creation

In the context of the Lower Shiplake appeal the Inspector commented at paragraph 61 that:

"The proposal would also result in wider economic benefits through construction jobs and local investment during construction, expenditure in the local economy following occupation, and employment at the facility. I give these benefits moderate weight given the nature and scale of development."

When considering the Sonning Common appeal the Inspector noted at paragraph 113 that:

"I do accept that the proposal would deliver economic benefits to the local economy and jobs as well".

I consider that this is a factor that is capable of being afforded moderate weight in favour of the application proposals.

Appendix IW3

Relevant care home appeal summaries

Appeal Ref: APP/P1425/W/23/3326282

Date: 11 January 2024

Address: Florence House, Southdown Road, Seaford BN25 4JS

Proposal: New care home

26. Spatial Policy 2 of the LPP1 confirms a requirement for a minimum of 185 dwellings to be delivered in Seaford, and the main parties agreed that the proposal would deliver the equivalent of 33 new homes towards the Council's HLS. However, while I acknowledge the general need for modern, energy efficient and appropriate accommodation for the older population generally as set out in Policy CP2 (2) of the LPP1, and that national Planning Policy Guidance says that housing for older people is 'critical', I heard that there is no policy basis proposed within the Council's emerging local plan that would relate to specifically to care homes. Therefore, while there may well be need for care homes in the wider area, such as Eastbourne, Polegate, Willingdon and Hailsham, including for people with dementia, I am not persuaded that care home accommodation is a priority for the Council or that, given the stated 'medium luxury' standard of the scheme, it would be attractive or affordable to local people to enable them to free up general needs housing in the nearby area. Therefore, while mindful of Paragraph 63 of the Framework, I can only afford this benefit moderate weight.

27. Economic benefits arising from the proposal would include employment opportunities connected to the construction of new homes, as well as employment opportunities related to the operation of the care home. There would also be potential cost savings to the NHS through the provision of bedspaces. I afford these benefits minimal weight as some of the employment opportunities are likely to be short-term, and the number of bedspaces provided would be relatively small when balanced against NHS provision as a whole.

28. Social benefits of the development would include the well-being of residents in a communal setting with an outside space. The scheme would also be located in a settlement boundary with public transport links to enable friends and relatives to visit. I attribute this some limited weight.

Appeal Ref: APP/Z3635/W/22/3312221

Date: 15 January 2024

Address: 280, 282 and 284 Staines Road East, Sunbury-on-Thames TW16 5AX

Proposal: 47 bed care home

25. Set against the harm identified there would be some limited social and economic benefits associated with the proposal. In particular through the creation of jobs during construction and operation, I also note that the appeal scheme would result in the redevelopment of the currently unsightly property, no.280. I saw at the site visit that the site is considerably overgrown and the building vacant and deteriorating. I also saw evidence of what I took to be antisocial behaviour around the property.

26. I note that it is not at dispute between the parties that there is a need for homes for elderly people in the borough. The appeal scheme would result in the provision of a 47-bedroom care home on an urban site that is accessible to local services, cycle routes and public transport and would result in a more efficient use of urban land. The scheme would make a little difference to the overall supply of housing in the borough both through the creation of additional accommodation in itself and in allowing elderly residents to vacate their current housing for accommodation that would presumably better meet their current needs.

27. These are material considerations that weigh in favour of the appeal scheme, and I afford them some weight.

29. The appeal scheme would also provide a much-needed care facility that would contribute to the choice of accommodation available to prospective occupiers, delivering housing to meet the needs of an aging population.

30. As such, the proposed 47 units, for the loss of three dwellings, would contribute to addressing the recognised shortfall. I accept, although it has not been quantified or qualified in evidence before me, that there would also likely be a consequential freeing-up of existing, potentially under-occupied,

housing to the general market as older people move into the redeveloped site. These considerations weigh in favour of the scheme and I afford them significant weight.

31. The evidence provided by the appellant indicates that the proposal would make a contribution to the local economy during construction, but there is little substantive evidence in this regard and the benefits would be primarily short term. The operation of the care home would result in approximately 47 full time jobs, with some part-time jobs. These matters are afforded some weight and weigh in favour of the scheme.

Appeal Ref: APP/Y0435/W/23/3321221

Date: 17 January 2024

Address: Linford Lakes, Wolverton Road, Milton Keynes MK14 5AH

Proposal: 70 bed care home plus extra care, retirement bungalows and residential.

47. Extra care housing is considered as a component of general housing need for the purposes of the Local Plan. While the number of extra care units built is currently less than the need forecast in the most recent Strategic Housing Market Assessment, I was also presented with evidence that there are vacancies in extra care schemes that have recently been completed and are available for occupation. It is ultimately a matter for the market to determine whether there is demand for such schemes and to deliver them. There is no dispute that the Council is able to demonstrate a five-year housing land supply. One of the purposes of having a five-year housing supply is to ensure that there is sufficient deliverable and developable land to enable the housing market to operate effectively and respond to demand as required. I am therefore satisfied that the need for extra-care housing can be met within the land identified for development in the Local Plan.

48. For nursing home accommodation, the Local Plan sets a separate target to that for general housing. On the Council's evidence, current supply meets some 55% of the need identified in the SHMA, and as the Local Plan is approximately halfway through its plan period this demonstrates that need is being met for nursing home space. The calculated supply does not distinguish between nursing home spaces aimed at the elderly as opposed to other specialist care, does not include closures of existing nursing homes, and includes permissions that have not yet been implemented. However, the element of bed spaces aimed at non-elderly specialist care would appear to be relatively small, and I consider it reasonable to include permitted but not yet built schemes, since if there is demand for such schemes it is likely that they will be built in due course. In addition, further nursing home accommodation is likely to come forward as part of strategic housing allocations elsewhere in Milton Keynes which have yet to be started. Taking all those matters together, I consider that supply is largely meeting the forecast demand for nursing home accommodation, and that the housing land supply in the Local Plan provides adequate opportunity to meet demand over the remaining plan period.

64. There would not be an overconcentration of residential institutional development, either on the site or within the context of the wider area. Neither is there an undersupply of such specialist housing in the Milton Keynes area. On balance, there would be adequate accessibility to services and facilities subject the transport improvements included in the scheme being implemented. There is no need for additional visitor car parking. All these matters are of neutral weight in the planning balance.

65. Set against the harm are the benefits that would accrue from the scheme. Although the Council is able to demonstrate a five-year housing land supply, the provision of a large amount of residential development would nevertheless be beneficial in helping to meet the need for housing, including specialist housing for the elderly. The same applies to the affordable housing, which would help meet the needs of those who are unable to secure housing in the open market. Given that there is a five-year housing land supply, I give these benefits moderate weight.

66. There would be economic benefits arising from construction activity in the short term, and the spending power of future occupants in the longer term. There would also be economic benefit arising from employment opportunities associated with the nursing home, extra-care units, and management of the linear park. I give these benefits moderate weight too.

Appeal Ref: APP/V1505/W/23/3326612

Date: 23 January 2024

Address: 41, 65 and land adjacent Potash Road, Billericay, Essex CM11 1DL

Proposal: 50 bed care home and 150 dwellings

49. The 2022 SEHNA assessed the need for *specialist housing for older people* (acronym: SHOP) over the period 2020-2040. This was based on 2011 Census prevalence rate of Basildon residents living in communal establishments and the projected increase in that age cohort. This produced a future prevalence rate of 34 per 1000 population requiring care home accommodation and an additional need of 380 bedspaces over the period 2020-2040 (19 per annum).

50. The appellant did not dispute the older population growth-rate. However, a projection based on stable care home occupancy rates was considered to risk perpetuating an under-supply in SHOP provision and frustrate an objective to lift this relative to an ageing population. The appellant provided prevalence rates derived from the PPG-endorsed SHOP@ tool and a 2017 Greater Cambridge Study. The Council's prevalence rate of 34 is very low compared to 110 in 1,000 people aged 75+ expected to live in residential care and nursing home accommodation, as derived from the SHOP@ tool. From this, the appellant derives a current need figure in Basildon of 970 care bedspaces, rising to 1,845 by 2043.

51. The proposed care home would meet a growing demand from self-funded occupiers, linked to the increased nursing and specialist dementia care requirements of an aging population and not fully offset by advances helping people live at home longer. Although ECC believes current care home provision in Basildon to be under-used, it recognises that the appeal scheme is aimed at this self-funded market and is responding to commercial demand. The appellant's evidence would support this, both through the Care Home Survey and significant differences in the demographic and socio-economic character of the Billericay catchment area, compared to Basildon as a whole.

53. Given the appellant's evidence of need, market demand and consented supply, there is no question in my mind that the benefits of the 50-bed care home should be given relative weight equivalent to the market and affordable dwellings proposed. In the light of the housing evidence discussed above, a 50-bed care home, along with the 150 dwellings, including the 47 to be delivered as affordable, would amount to social benefits that attract very substantial positive weight in the ensuing balance.

Appeal Ref: APP/M1520/W/23/3320925

Date: 14 February 2024

Address: Garden World Plants Ltd, Canvey Road, Canvey Island, Essex SS8 0QD

Proposal: 55 bed care home

24. The appellant's evidence identifies a significant shortfall in the Council's supply of housing land, standing well below the five years required in the Framework. I have not been presented with any evidence to the contrary. However, the appeal proposal would deliver slightly fewer bedspaces than the fallback scheme. This would translate into a slightly smaller contribution to housing supply, in terms of the equivalent number of homes released in the housing market. On that basis, having concluded that the fallback scheme is likely to be implemented, the reduced scale of the proposal is a disadvantage in terms of housing supply. However, the difference would be marginal, and I have accordingly given this disbenefit limited weight.

25. While the appeal proposal would provide slightly fewer bedspaces, it would provide a range of enhanced features for future occupiers, compared to the fallback scheme. These would include an enhanced range of social and communal spaces, improved circulation space, additional rooms adaptable for occupation by couples, and some with kitchenettes to support more independent occupation. A higher proportion of the ground floor rooms would have direct access to the patio. The proposal would also support an improved range of care provision, including accommodation suitable for people with dementia and/or milder physical disabilities.

26. The Framework is supportive of boosting the supply of homes, including housing for different groups in the community. Paragraph 63 makes clear that policies for the delivery of housing should cater for older people and the December 2023 revision to the Framework expanded its wording to specifically mention specialist accommodation, including care homes. Evidence from both parties highlights

Census data identifying a significant increase in the number of older residents locally between 2011 and 2021, and a related increase in demand for specialist housing. In that context, the fact that the appeal proposal would provide enhanced accommodation, catering for a wider range of needs than the fallback scheme, is a benefit to which I have given moderate weight.

37. There is furthermore persuasive evidence of a fallback position comprising implementation of an extant planning permission for a 60-bed nursing home. The fallback scheme would have a slightly greater effect on openness. With that in mind, I have given the fallback position very substantial weight.

38. The appeal proposal would also deliver enhanced accommodation compared to the fallback scheme, including specialist accommodation suitable for a wider range of occupiers. To that extent, it responds well to the increasing local demand for specialist care accommodation. It would provide a better environment and range of facilities for future occupiers. These qualitative advantages outweigh the proposal's marginally smaller contribution to housing land supply, and I have accordingly given them moderate positive weight.

Appeal Ref: APP/V1505/W/23/3328758

Date: 16 February 2024

Address: Land east of Ilfracombe Avenue, Bowers Gifford SS13 2DT

Proposal: 70 bed care home plus assisted living and retirement living

27. It is common ground that the Council can only demonstrate a housing land supply of 1.85 years. There would be 125 units (Use Class C2) arising from the proposed development. The National Planning Practice Guidance (PPG) outlines that for residential institutions, to establish the amount of accommodation released in the housing market, authorities should base calculations on the average number of adults living in households, using the published Census data.

28. The appellant has provided evidence to indicate that the Census shows that there are an average of 1.23 older people for each house in the Borough. Notwithstanding this, the guidance contained within the PPG does not precisely indicate the means by which this figure can be used to extrapolate the number of dwellings which would be released/vacated (and therefore contribute to HLS) as a result of the proposed development. Indeed, it stands to reason that an understanding of the proportion of single occupancy households comprising older adults would need to be established in order to determine the precise likely number of dwellings released as a result of the proposal. This evidence is not before me.

29. Notwithstanding this, there would plainly be a significant proportion of dwellings released to the market as a result of older adults moving to the care home or assisted living units. Indeed, the appellant points to a recent appeal decision where it was acknowledged that an 80 bed care home contributed an equivalent of 44 units to the Council's HLS. Given the number of units proposed under this proposal, it is reasonable to conclude that it would make at least a similar contribution to the Council's HLS.

30. On that basis, I consider that the proposed development would result in a significant contribution to addressing the Council's housing land supply shortfall. 'Significant', not least because of the severe extent of the shortfall. This is therefore a social and economic benefit of the development which can be afforded substantial weight.

31. The appellant presented a wide variety of evidence asserting a need for assisted living and care home provision within the Borough. Notwithstanding this, even the Council's evidence indicates a need for additional care home bedspaces and specialist housing between 2020 and 2040. Based on the Council's assessment of the South Essex Housing Needs Assessment (SHMA) dated June 2022, there is a need for 19 care home bed spaces per annum and 65 units per annum of specialist accommodation over the period up to 2040.

32. The Council has cited a number of recent planning permissions granted for care homes in the Borough. However, all of these permissions are factored into Table 2 of the Appellant's Statement of Case, which shows that even taking them (and other permissions) into account, since 2018 there has been a net increase of just five care home bedspaces. Over the plan period referred to in the SHMA there has been a net increase of just 45, which is still short of the 57 bedspaces which should have been provided over that period based on the SHMA.

33. Table 1 of the appellant's statement of case, which is based on data from the Council's own Annual Monitoring Reports, demonstrates that just 4 units of specialist accommodation for older people were completed between 2014 and 2022.

34. It is not clear whether or not the SHMA has factored in the past under-delivery described above in reaching figures for annual need. However, looking forward, despite the Council's assertion that schemes like this are best dealt with through the plan-making process, the new Local Plan is not scheduled to be adopted until 2027. On that basis alone and taking into account the significant amount of land in the Borough which is within the Green Belt, it is very difficult to see how the Council will meet the aforementioned need as expressed within the SHMA up until 2027.

35. There is some suggestion that there are high vacancy rates in existing care homes, however, there could be numerous reasons for this and it is not clear what a normal vacancy rate would constitute. In any case, the proposed care home would provide market-standard accommodation (with wet rooms) which the evidence indicates is lacking. Indeed, the planning permissions highlighted indicate that many care homes are undergoing demolition and replacement to bring them up to market standards, in many cases resulting in a reduction in the number of bedspaces despite the increase in the standard of accommodation. Clearly the proposal will provide a significant benefit in providing a significant quantum of market-standard accommodation.

36. The Council has also queried the catchment area used in Knight Frank's Planning Needs Assessment (2023). However, demand for housing for older people would not likely be constrained by administrative boundaries and therefore this is not a factor which weighs against the findings of the assessment. In any case, as outlined above - even putting the findings of the appellant's assessment to one side - based on the Council's own data and estimates of demand/need there clearly remains a significant unmet need for housing for older adults in the Borough. The proposed development would make significant inroads into meeting existing and future need in this regard. The social benefits can therefore be afforded substantial weight within this context.

38. The development would also comprise health and wellbeing benefits. In particular, it would combat loneliness, provide a basis for older people to maintain their independence and facilitate better access to healthcare. There would also be social benefits arising from the provision of a car park for parents collecting children from the nearby St Mary's C of E Primary School. Indeed, local residents have highlighted that there is significant disruption caused by on-street parking of vehicles during drop-off and pick-up times.

39. There would be economic benefits associated with permanent employment. With 95 to 120 jobs proposed. In addition, there would be more limited economic benefits associated with support for employment during the temporary construction period.

43. There would however be extensive and wide-ranging benefits as a result of the proposed development. These benefits are primarily derived from the contribution of the proposal to freeing up existing housing (within the context of a severe housing land supply shortfall) and the contribution of the proposal to meeting the existing and future need for specialist accommodation for older people. There would be several other social, economic and environmental benefits as I have identified in this report. Collectively, these benefits can be afforded even greater weight than that which I have afforded to the harm to the Green Belt. Indeed, in this instance, the extent of the harm I have identified would be clearly outweighed by other considerations. Therefore, the very special circumstances necessary to justify the development exist.

Appeal Ref: APP/H1515/W/23/3324416

Date: 22 March 2024

Address: Heron Court, 198 Brentwood Road, Herongate, Essex CM13 3PN

Proposal: Extension to existing care home (22 extra beds)

14. The proposed extension would increase the footprint of the building by 140% and the overall bulk and mass by more. This would result in a clearly disproportionate extension to the original building and would have a greater impact on openness of the Green Belt than as existing. The proposal would

therefore be inappropriate development in the Green Belt by reason of inappropriateness and the effect on openness.

15. However, the current accommodation in Heron Court is sub-standard. The proposal would result in a more efficient and higher quality layout with better facilities. It would also create a larger care home that meets the critical mass to provide high quality care facilities in this location. The need for additional care home beds within the catchment area of Heron Court has been demonstrated. As set out above, there would be an enhancement to the character and appearance of the locally listed building, the Herongate CA, and the wider area. The Council consider these other considerations clearly outweigh the harm to the Green Belt and therefore that 'very special circumstances' exist. I agree with this assessment and the proposal therefore complies with Paragraph 153 of the Framework.

Appeal Ref: APP/B1550/W/22/3313730 & APP/B1550/W/23/3324879

Date: 12 April 2024

270 Eastwood Road, Rochford, Essex, SS6 7LS

Proposal: New care home and later living dwellings

23. There is a dispute between the parties as to the level of need for future care home provision but I have been provided with details of a number of other care home sites that are under construction, having been granted planning permission over the past 5 years. These new care homes will go some way to both meeting current need for care home beds and addressing any previous undersupply.

24. This approach was accepted by the Inspector in APP/B1550/W/20/3251565, where it was stated that much of the district's needs would be likely addressed by the development at Rocheway and/or other care homes. That appeal permitted a care village with a range of different accommodation types, including a 93 bed care home, further adding to the Council's supply.

25. This shows that the lack of a local policy specifically for specialist housing for older people is not preventing the provision of this type of accommodation. Furthermore, the appellant confirmed at the hearing that the market homes included in the appeal scheme are not intended to meet the definitions of age restricted general market housing, retirement living or sheltered housing or extra care housing or housing with care. This limits the weight that can be given to this part of the scheme.

26. Even if I were to accept the appellant's case that in that appeal the Inspector may not have had the same level of evidence before them and that the evidence before me demonstrates there is a significant unmet need for care homes in the Rochford District, the timetable for the Local Plan indicates the new plan will be adopted by Q2 of 2026, so within two years time.

27. The new Local Plan would be able to identify sites for any future needs identified through the South Essex Housing Needs Assessment (SEHNA). It is important that a strategic approach to delivery of all types of housing is properly planned for. This ensures future provision is allowed to be considered on the basis of a proper evidence base, tested as part of the Local Plan examinations. I am therefore satisfied that the District Council will be able to respond to any levels of higher need as identified by the appellant, through the Local Plan process.

28. Furthermore, evidence provided by the consultation response of Essex County Council indicates that current care home provision in Rochford is under used, with average occupancy levels of 75% and on this basis they have not identified Rochford as a current area for growth in the sector.

29. However, I accept that the planning practice guidance sets out that the need to provide housing for older people is identified as being critical and that this proposal would go some way to meeting future need within the District. As such I have given the need for the development significant weight.

Appeal Ref: APP/Q3820/W/23/3332033

Date: 10 May 2024

Address: 1066 Balcombe Road, Crawley RH10 3NL

Proposal: 64 bed care home

59. The 2019 SHMA sets out that there was a shortfall of 437 Older Persons' Care Bedspaces in 2019 and that this would increase to 1,029 by 2039. Other than the closure of Penn Court, thereby reducing

the supply, I have not been made aware of any new facilities having subsequently opened. The Council consider the favoured approach is to retain people in their own homes for as long as possible and provide extra care facilities but no clear figures for this or evidence contrary to the 2019 SHMA have been put before me.

60. Several permissions and applications for forms of care provision were highlighted in the Council's appeal statement. Notwithstanding this, from the evidence provided at the Hearing, the nature of the provision in many of those are not directly comparable to the care home provision the appeal scheme proposes. There was also uncertainty over whether some of these permissions are still extant and no confirmation as to any having commenced. Consequently, unlike the appeal scheme, they would not quantitatively address the current or future shortfall.

61. The presence of a 5-year supply of housing land has not been disputed. A need for affordable units in general and that the Borough has population characteristics that could influence the type of overall care and older person provision is not questioned. However, there is still an identified need and shortfall for the type of provision the appeal scheme would provide.

62. That there are allocations in the adopted and emerging Plans that could potentially come forward in the future, does not alter that at present, this has not been reflected in implemented planning permissions. A letter from Oculus, provided at the Hearing, indicates that there is a developer in place to deliver the appeal scheme.

63. While most of the existing care bed rooms in the area have en-suite facilities, not all do. There is also said to be some variation in the amount and quality of on-site facilities at the existing care homes in the area. The indicative plans indicate the provision of several communal facilities. In addition, en-suite bedrooms are proposed, and a condition imposed to ensure these are provided. Qualitatively the proposal would also be beneficial.

64. Given that the supply has only reduced from the 312 stated in the 2019 SHMA, a 64-bed care home would represent a sizeable increase. The provision of a modern facility would also aid in enhancing the quality of the accommodation. Extra provision would assist in reducing the need for occupiers to remain in hospital and therefore free up bed spaces. In light of the above factors, I give the contribution towards care home provision substantial weight.

65. The appeal site is located in a residential area, designated for development with reasonable access to public transport, services and facilities. The proposal would align with local and national policy aims to make efficient use of land and maximise densities. It would bring social and economic benefits to the area associated with the construction, operation and occupation of the proposal. This includes to employment. Due to the scale of the scheme, I give these factors moderate weight.

66. In terms of harm, I give minor weight to the harm to the character and appearance of the area. The lack of appropriate living conditions for future occupiers attracts moderate weight. There are conditions imposed and further details that would be provided as part of reserved matters submissions that would relate to these issues and could be assessed at that stage. The proposal would be contrary to the development plan as a whole. Notwithstanding this, in favour of the scheme there is substantial weight for care home provision and moderate weight for the other benefits of the scheme.

67. In this instance, the proposed development would conflict with the development plan, but material considerations indicate that a decision should be made other than in accordance with it.

Appeal Ref: APP/X1355/W/24/3339936

Date: 22 May 2024

Address: Land South of South College, The Drive, Durham DH1 3LD

Proposal: 74 bed care home

7. It is suggested that there is an oversupply of residential and nursing care home bedspaces, and the Council's Adult and Health Services question the need for the proposal. My attention has been drawn to a Market Sustainability Plan (MSP). While there is not any detailed statistical evidence within it the plan states that there is around 85% under occupancy in the older peoples care homes market and it is

indicated that care home operators have highlighted concerns regarding a lack of placements. There are said to be no significant issues with quality or capacity in existing care homes, and two care homes have recently closed owing to under occupancy. In addition, two new care homes previously granted permission have been constructed.

8. Nonetheless, the minutes from the meeting of the planning committee suggest that one of the closures was in a different area of County Durham to the appeal site and the new care homes are similarly in different parts of the county. Moreover, I have not been presented with any details regarding the type of provision at these establishments and as such I am unable to determine whether or not they are comparable to the appeal scheme. The appellant's position is that there is a need for care home beds in the local area.

9. Notwithstanding that there is no policy requirement for an assessment of need to be undertaken to justify proposals for specialist housing for older people, even if I were to accept the Council's view that there is currently an oversupply of bedspaces there is no clear evidence that the proposal is of such a scale that it would result in a significant over provision of specialist older peoples housing, to the extent that it would be detrimental to the local business needs of existing providers.

10. In coming to this conclusion, I have taken into account that the MSP states that it is not anticipated the current under occupancy would cause significant or overall market failure. Furthermore, I share the view of the Inspector in their decision relating to a care home for older people in Cheltenham that it is not the role of the planning system to manage the care home market.

11. The supporting text to Policy 15 of the CDP indicates that in considering future housing needs other forms of specialist accommodation may be more appropriate than conventional sheltered housing to rent. The MSP sets out the Council's and wider care partnership's strategic direction of travel for the provision of older people's services which is a preventative and 'home first' approach to reduce the need for care home placements, in line with national best practice. I also acknowledge the responsibilities of the Council under The Care Act (2014).

12. Nevertheless, the definition of older people for planning purposes in the Framework recognises the diverse range of needs that exist. The Planning Practice Guidance (PPG) states that the health and lifestyles of older people will differ greatly, as will their housing needs, which can range from accessible and adaptable general needs housing to specialist housing with high levels of care and support.

13. The Council's home first approach is a county wide strategy and there will no doubt be variations in the needs of older people at the local level given the complexities of the differing health needs and lifestyles of older people. In meeting older peoples' housing needs it is therefore my view that there is a role for specialist care home facilities such as the proposal to operate alongside interventions and packages to enable a home first approach. The proposal would contribute to the choice of accommodation to suit older people's changing needs and there is no substantive evidence that in doing so it would undermine wider opportunities for development, including the Council's efforts to implement alternative models of service delivery on a strategic level or diminish the ability of businesses to invest, expand and adapt.

14. To conclude, the proposal would not have a harmful effect on existing older peoples housing provision or providers, with regard to supporting economic growth and local business needs and wider opportunities for development. The proposal therefore accords with Paragraph 85 of the Framework which states that significant weight should be placed on the need to support economic growth and productivity, taking into account both local business needs and wider opportunities for development.

Appeal Ref: APP/P5870/W/23/3330511

Date: 14 June 2024

Address: Land at Woodcote Green Garden Centre, Woodmansterne Lane, Wallington SM6 0SU

Proposal: 70 bed specialist neurological nursing home

38. The scheme proposes a 70-bed care home comprising accommodation designed to support the needs of those with neurological conditions. It would cater for patients of all ages who are unable to be discharged into a home environment due to their profound and complex conditions.

39. The appellant's Neurological Care Need Statement indicates that nationally 1 in 6 people are living with at least one neurological condition. There is an under provision of dedicated specialist neurological care facilities across the country with the vast majority of patients inappropriately placed in care homes that cater for the elderly.

40. At borough level the appellant contends that Sutton has some of the highest prevalence rates of long-term neurological conditions in London. The appellant indicates that between 2012 and 2016 there were around 100 admissions per year to local specialist neurological wards. The appellant cites academic research which indicates that between 12% and 20% of individuals are discharged to specialist nursing homes following a hospital visit. Taking 16% as the midpoint of those needing specialist care and based on hospital admissions the appellant contends that there is a minimum need for 16 specialist neurological bedspaces per year. This equates to a minimum need for 256 specialist neurological bed spaces over the whole plan period.

41. In addition, the appellant has produced a Supplementary Need Assessment which analyses the demand and supply for specialist dementia care home spaces within a 5-mile catchment area of the site. The assessment indicates a current undersupply of bedspaces of at least 417 worsening to 566 by 2025.

47. Throughout the appeal proceedings the Council have questioned the need for a specialist neurological care home highlighting SLP Policy 11 which indicates that there is an oversupply of bedspaces. Whilst there may be an oversupply currently, the policy does not set a moratorium in respect of developments for care homes or specialist facilities and indicates that by 2026 there will be an undersupply of bedspaces in care homes. In any event, the proposal would meet a specific need for which there is no specialist facility in the area rather than adding to the pool of elderly care home bedspaces.

48. Having regard to the information before me there is no compelling evidence to suggest the appellant presented the proposed development on the basis that it would only serve the needs of the residents of Sutton, despite the Council's assertions. The appellant's reports in respect of need clearly set out the national context and highlight local need. The appellant's approach to establishing need based on the geographical location of the appeal site and the administrative area of the local planning authority seems a sensible and reasonable one to me. Given its specialist nature it is reasonable to assume that it would draw patients from a wider area.

52. It is evident that the key concern of the ASC is the affordability of spaces. However, the nuances of the care market and the affordability of bedspaces are matters that fall outside of the planning regime and in turn what I can consider as part of my assessment of a Section 78 appeal.

53. I have no reason to dispute the quality of care provided in existing care homes. However, in my view, it would be reasonable to assume that individuals would benefit from being placed in a specialist environment that caters for their specific needs rather than pepper potted in non-specialist care homes.

54. I acknowledge that predicting with certainty the precise need figure is not an exact science. However, the appellant's assessment of need for specialist bedspaces including those suffering from dementia does not appear to be unrealistic based on the evidence base and methodology presented. Whereas I have significant concerns about the data provided by the Council. As such, I find the appellant's evidence more reliable in terms of demonstrating need.

55. To sum up I find that the proposed development would provide a specialist care facility for which there appears to be a need currently and in the future. An uplift in the number of bedspaces would assist in addressing any shortfall generally and the scheme would result in improved health facilities for individuals with specialist neurological conditions irrespective of their financial status or age.

Appeal Ref: APP/Y3615/W/23/3326567

Date: 1 July 2024

Address: Springfield Manor Nursing Home, Hogs Back, Puttenham, Surrey GU3 1AQ

Proposal: Extensions and alterations to existing care home

29. The PPG sets out that the need to provide housing for older people is identified as being critical. The development would contribute 20 additional bed spaces to the identified local need for care home rooms; albeit this is not considered to be urgent by the Council, nor is the contribution to overall need significant.

30. However, while I note that the existing provision meets with Quality Care Commission (QCC) requirements, following my site inspection, I do not doubt that the proposal would provide an uptick to the fabric, internal layout and the general facilities of Springfield Manor nursing home. Moreover, the provision is currently well-used by Surrey County Council residents. The proposed development would also enable a range of more specialist care and up to date staff facilities. As such, I afford the development considerable weight.

31. In addition, I give the short-term economic benefits and increased employment opportunities associated with the construction of the scheme some moderate weight. There would also be some increased but limited social benefits for new residents and their visitors. Minimal environmental benefits related to new landscaping and tree planting are also given weight.

Appeal Ref: APP/Z0116/W/24/3342055

Date: 19 August 2024

Address: 8-10 Station Road, Shirehampton, Bristol BS11 9TT

Proposal: New care home

21. The appeal scheme would see a derelict site within an accessible location put to productive use, providing 56 specialist units of care home accommodation, and in turn releasing 22.76 dwellings onto the market. The linked social and economic benefits would be amplified by a pronounced unmet local need for specialist homes, and the Council's shortfall in deliverable housing sites, the demonstrable supply of which currently stands at 3.75-years. These benefits would however be directly compromised by the scheme's failure to provide acceptable living conditions for some of its occupants, and its adverse effect on those of neighbours. That being so I attach only limited weight to the otherwise modest social and economic benefits of the scheme.

Appeal Ref: APP/A1530/W/24/3339756

Date: 24 September 2024

Address: Land West of Stanway Western Bypass and South of Church Lane, Stanway, Colchester, Essex, CO3 8WD

Proposal: 72 bed care home

23. The Planning Practice Guidance (PPG) states that the need to provide housing for older people is critical¹, as people are living longer and the proportion of older people in the population is increasing. Essex County Council (ECC) is the relevant local authority for the commissioning of adult social care, including care home provision, and was represented at the hearing.

24. The appellant's UNA is set within the context of the increasing numbers of people over 65 in Essex, which is predicted to rise from 21% at present, to 25% by 2040. The UNA is based on a 5 mile catchment area from the appeal site, and on the Colchester Borough administrative area. To 2027, there is an excess of 304 market standard care home beds in the catchment area and 81 in the local authority area, but in relation to dementia care beds, a shortfall of 8 in the catchment and 103 in the local authority areas respectively.

25. When assessed against the benchmark of full market standard bedrooms which incorporate ensuite wetrooms, levels of need rise to 413 for the catchment and 691 for the local authority area to 2027, the earliest date on which the scheme could be operational.

26. ECC's Market Shaping Strategy (MSS) places greater emphasis on supporting people at home and increasing extra care housing for older people, with fewer residential care placements. Whilst not disputing the levels of need set out in the UNA, the Council's position is that there is an oversupply of C2 residential care in Colchester. In support of that view, the Council points to the fact that average occupancy in Colchester stands at 88%, whereas for long term viability, occupancy needs to be around 95%. The Council also takes issue with the use of market standard bedrooms as a factor in assessing levels of need.

27. ECC's latest Market Position Statement does, however, acknowledge that there is a need to increase the number of nursing care homes across Essex to ensure that there is capacity for short periods of intervention for those with complex needs, within the overall context of keeping people in their community for as long as possible. The immediate short term need is for dementia care beds, and whilst no breakdown of the appeal proposal between general care and dementia care has been given, that will be informed at the reserved matters stage by the operator's commercial decision and any updated evidence of need.

28. The Council's position is that care homes are expected to be delivered on the sites allocated in the development plan and that a Local Plan review is underway through which sites may also be identified for such provision. A site at Wivenhoe came forward through the Neighbourhood Plan for supported living accommodation, and other accommodation may come forward on sites identified through the Plan review. In the interim, there is nothing in the evidence to indicate that the appeal proposal would result in a significant excess in the provision of care home and dementia beds in the area, or that it would undermine the 'home first' approach in the MSS.

29. The Framework and the PPG recognise that a diverse range of housing is needed to meet the needs of older people. There is clearly a level of uncertainty about future levels of need post pandemic, and as older people's needs become more complex. The proposal would contribute to the choice of accommodation in the catchment and the local authority area, and there is nothing to suggest that it would undermine the development of allocated sites that may be identified for C2 use in the future through a Plan led approach.

30. Overall, a quantitative need for dementia beds in the short term and a need for care beds in the longer term is identified in the appellant's evidence. A qualitative need has also been demonstrated. The provision of LPS2 Policy DM10 to demonstrate a proven need for specialist housing is satisfied.

Appeal Ref: APP/X0360/W/23/3336000

Date: 26 September 2024

Address: Oak Dale, Lower Wokingham Road, Crowthorne, Wokingham RG45 6BX

Proposal: New care home

123. Policy CP 2 of the Core Strategy requires development to contribute to the provision of sustainable and inclusive communities to meet long term needs, and states permission will be granted for proposals that address the requirements of, amongst other matters, an ageing population. This aim is carried through in Policy TB09 of the Local Plan which indicates an in principle support of proposals for accommodation to provide for peoples' needs over a lifetime, which includes, extra care homes, dementia extra care units, enhanced sheltered schemes and proposals that allow the elderly and those with disabilities to remain in their own homes or purpose built accommodation.

124. In this respect the current development plan generally reflects the provisions of the Framework that the needs of groups with specific housing requirements are addressed and also the Planning Practice Guidance (PPG), which says strategic policy-making authorities will need to determine the needs of people who will be approaching or reaching retirement over the plan period, as well as the existing population of older people.

125. The proposal would provide a residential care home capable of providing a high level of care, that could support future residents with dementia. There is dispute between the main parties as to the extent of need for this type of accommodation in the borough.

126. In this regard, the Council draws attention to the updated Local Housing Need Assessment. The Council contends that residential placements is not increasing in the area, and asserts, in respect of projected need for care homes in the borough, that Standard Methods produce results that are unfeasibly high. It is highlighted that local demographic factors permit residents to stay in their homes longer in this borough, and that this preference for individuals to remain in their homes in older age mitigates the identified need for care home spaces in the borough.

127. In respect of existing residential care home provision, Appendix 7 of the Council's appeal statement shows, in March 2024, that from 22 locations there was a combined availability of 114 beds vacant in the borough. This Appendix was updated during the appeal process and showed, in July 2024, the locations increased to 23 while the number of vacant beds decreased slightly to 103. In any event, while lower than the 90% occupancy rate prior to the pandemic, the most up to date data indicates that the occupancy rate is only just short of that figure, being at 88% in July of this year.

128. This aside, the Council's evidence indicates, for the period 2021-2040, there would be a need for an additional 464 care home bedspaces in the borough. The Council advances, in light of the above available capacity, local factors and trends, that caution is required when planning for accommodation for older people. It is contended that demand for care home services has fluctuated in the borough. However, while the evidence for the past four years shows some fluctuation over this period, it does not show a significant decline in the demand for residential and nursing home care placements over the period March 2022 to June 2024.

129. National guidance indicates there may be exceptional circumstances, including the particular demographic characteristics of an area, which justify an alternative approach to assessing housing need. Also, the Council draws my attention to the recently approved care home provision in the borough. Be this as it may, even if I accept the Council's criticisms about the appellant's planning need assessment, the evidence advanced in this case shows that there will be a total need of 1062 care beds in 2035; this equates to a shortfall in bedspaces of 158 over the current available beds in existing care homes in the borough.

130. Moreover, while there may be a local preference for people to receive care in their own homes, I find no compelling evidence that this would be a reasonable and practicable option for all older people in the borough. Indeed, as clarified in the Framework's Glossary, housing for older people can encompass a diverse range of need. Reflective of this, even adopting the Council's conservative assumptions of population growth and taking account of local factors, evidence shows, assuming a 95% occupancy rate, that there will be the need for a new large care home around 2026, 2030 and 2034 in the borough.

131. Crowthorne and the appeal property are close to the administrative boundary of the borough, and concerns are raised that there would be no certainty that provision at the appeal property would address the borough's need. This may be so, but this would likely be the case for residential care homes in neighbouring Council areas and need could extend across boundaries such that this would not be a justification for failing to address the identified need for this type of accommodation in Wokingham borough. In any event, this does not change the factor that there is a current local need and identified future need for residential care home provision in the borough.

132. This proposal would contribute to the local need for residential care home accommodation. As a 60 bedroom care home, the development would significantly work towards addressing this local need and would in turn support the aims of Policy CP2 of the Core Strategy and Policy TB09 of the Local Plan.

139. The proposal would result in a net gain of residential units, and this would positively contribute to the Government's objective to significantly boost the supply of much needed homes in this area. Moreover, catering for older people, this development would address an identified local housing need for different groups in the community. This amounts to considerable benefit, and in turn I attach considerable weight to these benefits in this appeal.

140. As a windfall site the development could be built relatively quickly. There would be economic benefit through the construction phase. The development would result in employment opportunity. The Council

states that this would not be unique to this scheme. Be this as it may, the evidence advanced indicates that there would be 48 direct jobs created. While some of these would be parttime positions, this is still not an inconsequential contribution to local employment opportunities.

Appeal Ref: APP/V4250/W/24/3342859

Date: 1 October 2024

Address: Kings Park Christian Centre, Leigh Road, Leigh WN7 1UB

Proposal: 66 bed care home

22. The proposal would be a purpose-built care home with 66 beds in single rooms with ensuite wet rooms. Generous communal space would include gardens, cinema room, hairdressers, café and library. It would provide a high standard of care and quality of life for its self-funded residents, anticipated to be at least 70 years old and in need of 24/7 supervision. The proposal would provide for roughly equal amounts of general residential and residential dementia care.

23. The Framework and the Planning Practice Guidance (the PPG) stress the importance of addressing the requirements of groups with specific housing needs, including older people. There is a critical need for older people's housing due to the increasingly ageing population and a requirement for a better choice of accommodation to suit people's changing needs.

24. The PfE sets out the significant predicted population growth across Greater Manchester, and particularly Wigan, in those aged 65 and over. It identifies the need for a diverse range of new provision to meet the needs of older people. In this regard, Wigan Borough Supported and Specialist Housing Prospectus December 2021 notes that there will be an increasing number of people living with dementia requiring specialist residential and/or nursing care provision.

25. The Carterwood Planning Need Assessment (April 2023) estimates that, at the earliest the care home could be available, there will be a significant net need for minimum market standard care home beds and dedicated dementia beds in the catchment and the local authority area. The numbers are expected to rise over time, reflecting the sustained and escalating nature of need. Moreover, those moving into care homes in future are increasingly likely to require high dependency nursing and dementia care provision.

26. Carterwood report that the need for care homes may be reduced by alternative forms of care, such as underpin the Council's specialist housing strategy. This aims to support people in their own homes or in Extra Care accommodation until their needs can no longer be met by home-based care and support. At that point, the greatest need for additional C2 residential care provision is for nursing and residential homes, particularly those with nursing dementia capacity. On the basis that the Council's strategy is working well, it is expected to continue to reduce the demand for general care home beds in this area.

27. The proposal would not provide high dependency nursing or dementia care. It would cater for people manageable in the care home setting, whose needs were compatible with existing residents and the business. The care home would aim to be a home for life for existing residents, but those with increasingly complex needs would be likely to move on to more specialist care. The complex health issues and challenging behaviours that cannot be managed at home would not be met by the proposal. The proposal would contribute quantitatively to the supply of older people's housing, but it would not contribute to meeting the identified significant and increasing demand for higher dependency care.

28. Irrespective of the economics of the different types of care, there are clear benefits in terms of health outcomes and quality of life associated with supporting people in their homes or in Extra Care housing. Moreover, the Council's strategy appears to reflect the wishes of elderly people as reported by household surveys where the majority of those aged 65 and over want to stay in their homes with support, while less than 10% would consider entering a residential care home. This tallies with the evidence that most people enter care homes not through choice but because their needs can no longer be met at home. I have no reason to think this would vary between those requiring affordable beds or those self-funding their care.

29. The appellant points out that comparable care homes in the area are full and have waiting lists, evidencing a demand for private care beds. The PfE acknowledges that there are some prosperous housing areas and that private provision plays an important role in the supply of housing. Nevertheless, there are over 70000 people on local authority housing waiting lists across the region and there is a need for a major boost in the supply of affordable housing.

30. The Council's capacity tracker does indicate that current care bed places are effectively at full capacity, but this is apparently due to the repatriation of elderly people previously placed outside the area and the Council is not aware of people in this area waiting to move into care. Moreover, only around 12% of care beds are occupied by self-funders, which is apparently representative of the local socio-economic demographic. While I do not dispute that similar private care homes may have waiting lists, there is little substantive evidence of any significant local demand for self-funded, lower dependency care beds.

31. That being said, I acknowledge that there will likely remain some demand for more general residential and self-funded care beds, as part of the overall increased need due to the rapidly growing elderly population. Nevertheless, taking into account the particular circumstances including the Council's strategy, future trends and socio-economics, the proposal would occupy a limited niche between the choice of supported independent living and the need for higher dependency nursing and dementia care. Moreover, it would be targeted towards, and affordable by, only a small proportion of the population.

32. LNT is a well-established developer and operator of care homes, confident that the proposal would be commercially viable as are its other care homes. Moreover, the business could be flexible, or it could close, if the proposed private residential care provision proved unviable. However, I must take into account what is proposed rather than what theoretically could happen in future. On the basis that the proposal would not contribute to meeting the significant identified demand for affordable, higher dependency nursing and dementia care, the proposed care beds carry modest weight in favour of the scheme.

33. The proposed beds would equate to around 35 dwellings, which would contribute to the government's objective of significantly boosting the supply of homes. As such, while the Council can demonstrate over a 5 year supply of deliverable housing sites (5YHLS), this does weigh in favour of the proposal.

34. The operation of the care home would create 50 to 60 new employment opportunities, the majority of which would be filled by people living locally. Staff would be employed at above minimum wage and offered training and opportunities for career progression. A Training and Employment Management Plan, to promote training and employment opportunities for local people, could be secured by planning condition.

35. There would be economic benefits both short-term during construction and during the operation of the care home. There would be limited additional spend from care home residents, visitors and staff who already live locally, but future occupiers of the equivalent 35 dwellings would provide additional support to the local economy. Collectively the employment and economic benefits weigh to a moderate degree in favour of the scheme.

Appeal Ref: APP/N4720/W/24/3343107

Date: 22 November 2024

Address: Mercure Hotel, Wetherby Road, WETHERBY, LS22 5HE

Proposal: New care home with senior living homes and foodstore

4. The scheme would include 84 dementia care home units and 8 independent senior living homes and would play an important role in helping to meet the growing need for older persons' housing in the area. The 2017 SHMA predicted a 75% increase in the requirement for older persons' specialist accommodation and a particular need to increase the provision of enhanced sheltered housing and extra care support. The latest SHMA of 2024 expects a need for around an additional 8,800 units of accommodation by 2040 to cater for the elderly population. The City Council recognises that there is an undersupply of nursing dementia and nursing beds in Leeds and, to a lesser extent, residential

dementia care. There is currently a heavy reliance on homes converted from alternative uses, and on ageing purpose-built accommodation, and 26 homes have closed over the last 10 years. Leeds City Council's most recent monitoring report states that only 58 and 66 older persons' housing units were completed in 2019/20 and 2020/21 respectively. In this context the scheme would appear much needed. It would be aligned with the National Planning Policy Framework and Policy H4 of the Core Strategy, which recognise the need to provide homes for older persons, and Policies HG2-20 and HG4 of the Leeds Site Allocations Plan, which indicate that the appeal site is suitable for older persons' housing and independent living.

8. In conclusion, the scheme would not materially harm the housing land supply position in Leeds and would have a very positive effect on the delivery of homes to meet the growing need for housing for older people, in accordance with the objectives of Core Strategy Policies H4, Site Allocations Plan Policies HG2 and HG2-20 and the National Planning Policy Framework. It would not impair the ability to deliver the housing requirement set out in Core Strategy Policy SP6 or the distribution of housing in Policy SP7. It would make the best use of brownfield land within the urban area in accordance with Core Strategy Policy SP1.

Appeal Ref: APP/Z3635/W/24/3342657

Date: 22 November 2024

Address: Land East of Vicarage Road, Sunbury-on-Thames TW16 7LB

Proposal: 60 bed care home and 164 extra care

32. There are benefits in favour of the appeal. Most significant of these is the provision of 'housing with care' and a care home. The Council agree there is a significant level of need for 'housing with care' in the Borough. There is also an agreed need for care home bedspaces. It is also of note that there are currently no other such developments in the pipeline nor any proposed allocations in the emerging plan for this type of development. It is further agreed that the need figures for both will continue to rise in the future.

33. The need to provide housing for older people nationally is critical as set out in Planning Practice Guidance. There is no doubt that there is a clear and pressing need for this type of development in Spelthorne. In my view agreeing absolute figures for need in this case is purely academic, as even using the Council's more conservative figures, the proposed development would still leave a significant deficit in the provision of both types of housing in the borough. I therefore afford the provision of housing with care and a care home in this case very substantial weight.

Appeal Ref: APP/W1525/W/24/3345164

Date: 22 November 2024

Address: Field North of Montpelier Farm, Main Road, Little Waltham CM3 3PA

Proposal: 58 bed care home, 45 care suits and 100 care apartments

75. The parties agree that there will be an ongoing need to provide new SRA for the elderly and that there is a growing awareness of the benefits of extra care housing of the type that has been proposed. The estimates derived from three different models were not disputed and the Council notes that its own estimates do not differ greatly as to the broad quantum of need in the future, as agreed by the appellant's witness.

76. The SHNA indicates that by 2041 there would be an estimated need for 1,520 additional dwellings with support or care across the plan area, with a need for 886 additional nursing and residential care bed spaces. Using a standard multiplier of 1.8 bed spaces per dwelling for older persons accommodation, it equates this to around 492 dwellings. It consequently forecasts a total need for around 2,012 units up to 2041 or 106 per annum.

77. The appellant forecasts a total need of 1,803 units by 2042 which is not dissimilar but takes issue with the existing supply of 189 beds because only one private extra care scheme has been identified comprising just 58 beds. Using the Council's own analysis, the existing shortfall for housing with care consequently rises to 441 units according to the appellant. This broadly aligns with its own use of the SHOP model which demonstrates a shortfall of around 345 private extra care units.

78. The appellant also highlights supply pipeline issues which are informed by a comparative table that was submitted by the Council during the course of the Inquiry. Again, there is no great difference between the parties on this matter and the Council accepts that the current pipeline comprises 211 beds. The appellant estimates that by 2029 there would be an unmet need for 202 care beds and 846 private extra care units if no care bed closures are assumed. The basis for this calculation is undisputed and the Council was unable to identify any other schemes likely to come forward in this timeframe when questioned, despite a number of pre-application discussions having taken place. The predicted need, according to the appellant, is equivalent to three to four new 60-bed care homes and seven new 120-unit retirement schemes by 2029.

79. In terms of past delivery, the appellant points out that the Council has only consented 80 care beds and 60 private extra care units in the last 5 years. The Council highlights the fact that the implementation of the LP is still at an early stage, having been adopted less than five years ago. Consequently, it suggests that it is too early to determine whether policy DM1 of the LP is working. It points out that the major allocations upon which it relies for SRA, through policy DM1, are yet to be delivered. I also note that the Council is considering whether it would be appropriate to identify a percentage of the housing allocation to meet a range of older persons accommodation types on new site allocations in a preferred option topic paper on housing.

80. The current position, as well as the one likely to be present in 2029, can only be described as a sustained market and policy failure in relation to the provision of SRA for older people despite the relatively young age of the LP. Irrespective of the differences between the parties, the SHNA identifies a current shortfall of 310 market housing with care units and 289 care beds. Set within the context of the persistent under delivery of SRA over the last five years, this alone demonstrates the failure. It is also telling that the Council is considering setting numerical targets to remedy this situation as well as its acknowledgement that not all of the allocated sites would be suitable for the delivery of such housing which introduces further uncertainty regarding the timely delivery of SRA to meet the identified need.

82. It is clear that the proposal would meet an immediate SRA need in terms of providing private care bed and extra care facilities. This is an urgent and pressing need that the Council does not dispute. The scheme would make a substantial contribution to the supply pipeline over the next five years. For those reasons, I give this benefit significant weight.

Appeal Ref: APP/C1435/W/24/3339112

Date: 26 November 2024

Address: Land at Coopers Green Road, Ringles Cross, Uckfield TN22 3AA

Proposal: New care home

31. There is an acute need for care home accommodation, based on both the Council's and appellant's evidence and there is a high proportion of elderly residents in the district. The appellant claims there to be a need for 121 en-suite bed spaces now, rising to 189 by 2025. The Council presents no solution to this, with the Council's own Housing Needs Assessment concluding there was, at that time, likely to be a shortfall of 993 residential and nursing care bed spaces by 2039.

32. The proposal would provide 50 bed spaces for older people and would also provide an element of specialist dementia care, making a valuable contribution to an acute national need for such accommodation. This weighs substantially in favour of the scheme.

33. Furthermore, the proposal would free up larger family sized homes for rent or sale by older persons moving to the care home. Given the Council's lack of a 5 year housing land supply, this weighs significantly in favour. It is also undisputed that the scheme would provide a high standard of care and support for older peoples, in a purpose built environment that includes communal facilities, logically laid out spaces, wheelchair accessibility and safety measures. This has the potential to reduce costs to health and social services (including local GP practices) by providing specialist and dedicated in-house care and support; and reducing the need for residents (who might have previously lived alone) to call in existing local services. This weighs moderately in favour.

Appeal Ref: APP/V4630/W/24/3343105

Date: 2 December 2024

Address: Pelsall Villa Football Club, Walsall Road, Pelsall, WS3 4BP

Proposal: 66 bed care home

35. The Planning Practise Guidance states that the need to provide housing for older people is critical. Furthermore, The Council's development plan acknowledges that the demographic of Walsall is ageing and the large increase in the number of very elderly people will require some degree of care or specialist housing. The Council's SAD considers such developments should be "directed to locations that enjoy good access to public transport and services such as shops." The provision of the proposal would provide a facility for which there is acknowledged need and demand in an accessible location. It would also enable the release of about 47 houses back into the housing market at a time when the Council is unable to demonstrate a five year housing land supply. These figures are not disputed by the Council. These are significant social objectives of the Framework.

36. The proposal would deliver economic benefits in the form of construction jobs and from 50-60 new full time and part time jobs for the running of the care home.

Appeal Ref: APP/P0240/W/24/3347529

Date: 24 December 2024

Address: Land South of Leighton Road, Stanbridge, Bedfordshire LU7 9HW

Proposal: 66 bed care home, 99 extra care units, 43 affordable homes

32. With regard to extra care, the appellant's Need Assessment took an average from a variety of methodologies to estimate the likely need for extra care dwellings over the next decade, accounting for existing and planned supply. It suggests that there is currently an undersupply of just over 1000 units and that by 2034 this would be a little under 1500 units, based on revised figures given at the hearing. The Council's corresponding figures are that there would be an undersupply in 2035 of around 450 extra care units. The difference between the two would appear, at least in part, to be a result of the Council's figures assessing the need from people over 75 years of age only, whereas two of the three methodologies used by the appellant includes people over 65.

33. With respect to care home bed spaces, the appellant's Need Assessment suggests that whilst there is no immediate need, by 2034 there would be a need for about 700 en-suite bed spaces. The Council's corresponding figure is around 450 bed spaces in 2035.

34. All these figures relate to the whole of the central Bedfordshire district. The appeal site is in the far southwest of the district and so it is reasonable to consider that the development would not be likely to meet the demand from persons living in the far eastern side of the district. Indeed from the information provided by the Council, which is broken down into 4 sub areas, the shortfalls in both extra care and care home spaces were less in the Leighton Buzzard (within which the appeal site is located) and Chiltern Vale sub areas, than in the other two sub areas which stretch to the east. That said, it is also reasonable to consider that the development could meet demand from beyond the district, given it is only a few miles to the neighbouring authority.

35. Overall, with regard to extra care, I consider that the Council's figures are limiting based on the age profile used. Even accounting for the fact that the demand in Leighton Buzzard is only likely to be a small proportion of the demand over the whole district, the need is considerable and the proposed 99 extra care units would therefore make a significant contribution to meeting the local need. With respect to care home spaces, even if I were to accept the appellant's figure for central Bedfordshire, the proportion of the demand local to the site is not great and may well be exceeded by the proposed 60 bed care home. However these need figures should not be ceilings, and clearly the development could meet demand from neighbouring areas within, and beyond, central Bedfordshire. Taken together, I afford moderate weight to the provision of extra care and care home spaces.

38. The development would generate a significant number of jobs both during the temporary period of its construction, and in the long term at the care home and the other ancillary facilities. This carries moderate weight.

Appeal Ref: APP/N5090/W/24/3345445

Date: 15 January 2025

Address: Heathside High Preparatory School, 84 West Heath Road, Barnet, London, NW3 7UJ

Proposal: 3 storey care home

41. The benefits of the proposed development would include making effective use of a previously developed site in C2 use within a borough with limited land and resources. Furthermore, it would assist in achieving the Government's aim of significantly boosting the supply of housing. In particular, there is a shortage of suitable housing for our ageing population and the proposed development would provide accommodation for over 60 elderly residents.

42. The Knight Frank Assessment (May 2024) considers current care home supply within a 2.5 mile catchment area and finds a need for 1,555 bedspaces in modern purpose-built care homes within that catchment to 2033, 1,310 of which are needed prior to 2028. Given existing and future planned supply, there is demand for 954 additional bedspaces to 2033, 709 of which are required before 2028. A similar exercise has been undertaken for dementia care with a demand of 749 bedspaces in the same area, and an expected undersupply of 137 bedspaces to 2028 which would increase to 253 bedspaces to 2033.

43. Where care homes are provided, this frees up houses within the local market, including larger houses suitable for families. Furthermore, care home provision can save on adaptation of unsuitable housing and can assist in reducing pressure on in-home care provision. Care home residency can also be positive in reducing social isolation for older people. Additionally, the proposed development would provide local employment...

45. Taken together, the proposed development's benefits have substantial weight.

Appeal Ref: APP/L3245/W/24/3351748

Date: 05 February 2025

Address: Former Phoenix Garage, Paul Atkins Farm Services, Great Hales Street, Market, Drayton, Shropshire TF9 1JW

Proposal: 60 bed care home

32. The appeal scheme would address a need for this type of residential accommodation in the Market Drayton area. The provision of a care home would have wider benefits including improved quality of life for most future residents and reduced pressure on, and associated cost savings for, health and social care services. The proposal would contribute to the overall supply of housing in the area within a location that is highly accessible by public transport and to a wide range of services and facilities. The scheme would utilise a brownfield site and make efficient use of land. It would also provide employment and contribute to the local economy during construction and in subsequent occupation directly and indirectly. In these regards, I note the Framework supports the development of small and medium sized sites in sustainable locations to make efficient use of previously developed land and significantly boost the supply of a mix of homes. Due to the scale of the scheme, I give these factors moderate cumulative weight in favour of the proposal.

Appeal Ref: APP/P1560/W/24/3344547

Date: 12 February 2025

Address: The Oaks, Clacton Road, Weeley, Essex, CO16 9EF

Proposal: 2 storey 66 bed care home

26. The proposal would provide 66 residential care home beds for older people, providing both general purpose and dementia care. The average age of future residents of the care home would be 80+ years and each would be assessed as being in need of 24-hour care and supervision.

27. I also note that the care home would be compliant with necessary modern standards, and would provide amenity areas and services including a cinema and hairdressers. The appellant would apply for Care Quality Commission (CQC) registration, and it is stated that all of the appellant's other care facilities are highly rated by the CQC. The proposal would also provide generous, high quality external amenity areas which could be utilised by both residents and staff.

28. The appellant's Planning Need Assessment identifies a 'demonstrable need' for 489 additional standard wetroom care home beds within the market catchment area and 698 within the local authority catchment area. These shortfalls are anticipated to increase by 2036.

29. Furthermore, the appellant indicates that no sites are specifically allocated for the provision of care homes within the local plan. Suitable sites are increasingly difficult to find due to competition and demand from residential developers who, it is indicated, are able to pay higher land values. Where care homes are provided, this frees up houses within the local market, including larger houses suitable for families. Furthermore, care home provision can save on adaptation of unsuitable housing and can assist in reducing pressure on in-home care provision. Care home residency can also be positive in reducing social isolation for older people. The proposed care home will contribute to the mix of housing within the immediate area and contribute to a socially inclusive community.

30. The need to provide housing for older people nationally is critical as set out in the National Planning Practice Guidance (PPG). There is no doubt that there is a clear and pressing need for this type of development in Tendring District. Consequently, the cumulative benefits associated with the provision of a care home providing general needs and dementia care are afforded substantial weight.

Appeal Ref: APP/N0410/W/24/3348677

Date: 14 February 2025

Address: Land at Wilton Park, Gorell Road, Beaconsfield, HP9 2RJ

Proposal: 75 bed care home and assisted living units

60. Evidence also demonstrates that there are shortfalls in the wider Buckinghamshire area. There is also an acknowledged need for homes suitable for older people, currently amounting to 707 sheltered or retirement homes in South Bucks alone, with a forecast need for 1,270 homes by 2040.

61. The current Local Plan runs until 2026 and the emerging local plan is at a very early stage. Even if the Council were to submit the emerging plan for examination in 2026, the examination process and the other requirements of the planning process would result in a considerable time lag before site allocations could start to deliver homes. Until then, there will be no means of redressing the housing land supply position through the plan-making process.

62. Against this background, the scheme would deliver a substantial number of new homes for older people in need of care. Evidence suggests that this would release some 134 under-occupied homes on to the market. The scheme would therefore have the important double benefit of providing specialist housing for those in need of care and improving the availability of homes on the general market.

67. The scheme would deliver urgently needed new dwellings consisting of specialist housing for older people and would help to release homes, including under occupied dwellings, on to the general market...

Appeal Ref: APP/J2210/W/24/3351458

Date: 06 March 2025

Address: Land adjacent to Old Thanet Way, Whitstable CT5 3EH

Proposal: New build Care home

16. The appellant has set out a compelling case in respect of registered care accommodation need in both the entire district and the more immediate locality. A Care Home Need Assessment has been submitted, produced by Healthcare Property Consultants (HPC).

17. This document sets out a district-wide need, at the time of the assessment, of 274 ensuite bedrooms. This is broken down as 151 in the locality. In both cases, this is set to increase this year with an aging population. It is noteworthy that the district has a population of over 85s that is 19% above the national average, and increasing. The appellant's consultant from HPC confirmed at the hearing that, in his view, the need for older people's accommodation in the district is critical.

18. From the evidence before me, current facilities are clearly not sufficient to deal with the need now, and arising, in this housing category. Moreover, I note that a proportion of the existing care homes within the district are not purpose-built accommodation.

19. The Council argues that a good level of care accommodation is being provided and, in the pipeline, as acknowledged in HPC's assessment. The Council also sets out that from 2020/21 to 2023/24 there have been 167 bedspace completions, with extant planning permission for a further 245 spaces. I accept that there is evidence of positive planning activity providing consent for this type of accommodation. However, it is reasonable to conclude that there is no certainty that all, or any, of these schemes will be implemented. Moreover, those that are implemented would, in part, replace bedrooms that have already been lost in recent years.

20. Overall, the district is in a gloomy position in respect of registered care provision. From the evidence before me, this is set to continue, with only limited provision completed or in the pipeline. Accordingly, I am satisfied that demonstrable need for the proposed development has been adequately provided, and that this outweighs the harm that arises from the loss of the existing open space. The proposed development would therefore be in accordance with the relevant provisions of criterion c) of LP Policy OS9.

31. I have set out above some of the social benefits of the proposed development. In particular, that the proposed development would contribute to providing desperately needed care accommodation in the district. I give this public benefit substantial weight. Moreover, the Planning Practice Guidance sets out that the provision of 1.8 care beds is equivalent to a single dwelling. This means that the proposed development would provide the equivalent of 42 dwellings towards the Council's housing shortfall. I give this public benefit substantial weight. Additionally, there would be other benefits, including through employment during construction and following completion of the development. I give this public benefit moderate weight.

Appeal Ref: APP/V1260/W/24/3350004

Date: 14 May 2025

Address: Long Close Rest Home, 23 Forest Road, Poole BH13 6DQ

Proposal: Replacement care home

54. The Council is unable to demonstrate a 5 year supply of housing. The proposed 15 additional care home bedroom spaces would contribute towards the Council's housing delivery targets by 8 additional units³. This would attract significant weight.

55. The proposal would also deliver 15 additional care home bed spaces, which would go towards meeting an identified housing need, despite the Council submitting that 'there is currently a good supply of beds in residential care homes similar to those provided at this care home across BCP'. This would also attract significant weight.

56. There would also be economic benefits contributing to building a stronger, responsive, and competitive economy, supporting growth with construction and post-construction benefits. This would include investment of the site, job creation during construction and the support of facilities and services within the local area by new residents. There would be social benefits through the provision of improved care home facilities and an increase in care home bed spaces within the borough.

Appeal Ref: APP/C3620/W/24/3351839

Date: 21 May 2025

Address: Murreys Court, 10 Agates Lane, Ashted, Surrey, KT21 2NF

Proposal: Care home and assisted living

59. Paragraphs 4.35-4.37 of the LP set out the demographic changes in the district that are likely to result in a considerable need for more housing for older people in the coming years⁹. As a result, Policy H6 of the LP supports the provision of accommodation for older people but does not set a target. The examining Inspector was content with this approach. In addition, the need must also be considered through the prism of the Public Sector Equalities Duty and in this respect Policy EN5(6) of the LP requires appropriate weight to be given to meeting the needs of those with a protected characteristic, which in this case would include age and potentially disability. In this context, the appellants suggest substantial weight be given to the delivery of housing for older people.

60. Following discussions at the hearing the Council did not want to be as definitive as the appellants. The Council took a more nuanced position and suggested that there was a need for extra care accommodation, including residential care homes, but not for nursing homes. Consequently, it provided a range from moderate to substantial weight depending on how much nursing care would be provided (the weight reducing as the level of nursing care increases). Evidence provided by Surrey County Council¹⁰ supports the Council position by demonstrating that local nursing care bed provision is relatively high compared to the national average.

61. The appellants have not finalised details of the level of care that would be provided but its submissions confirm that the care home would function as both a residential and nursing home. It would not be practical to impose a condition prohibiting the provision of nursing accommodation because residents may move from residential to nursing care. Moreover, the provision of nursing care is still a benefit of the scheme. The local over provision just tempers the benefit a little. Overall, I afford the provision of accommodation for older people significant weight as a benefit.

62. In addition to this, the provision of accommodation for older people will free up existing homes, including sheltered/retirement and unoccupied homes, as residents move into the appeal scheme. The Council advised at the hearing that under occupation of housing was an issue in the district. The examining Inspector also recognised this at Paragraph 118 of their report. Accordingly, this would be another significant benefit.

Appeal Ref: APP/W1905/W/24/3354867

Date: 20 June 2025

Address: 303 Ware Road, Hoddesdon, Hertfordshire SG13 7PG

Proposal: 75 bed care home

13. A number of reports have been submitted which provide advice on the supply and demand and general need for care home provision in the local area, across Broxbourne Borough and Hertfordshire. These include a Market Analysis by Carterwood, Catchment Report by Cushman and Wakefield, two recent monitoring reports by Broxbourne Borough Council and Older Persons and Adult Disability Care Housing Need Model by Icení for Hertfordshire County Council.

14. Whilst these reports and studies each deliver slightly different results and have varying scopes and extent of geographical areas, there are a number of themes and this includes a general indication of there being a present surplus of residential care home provision in the local area. Indeed, this is reflected in the comments of the County Council in their response to the planning committee where it is identified (in line with the Icení Report) that there are projected to be a surplus of residential care spaces by 2042 in the order of 193 bed spaces. Whilst the time frames differ in the Carterwood Report, the results are not entirely inconsistent as this shows a shorter-term surplus of en-suite accommodation within a 5-mile radius of the site albeit that there is a much more substantial shortfall in bed spaces with wet room provision.

15. These results do focus on residential care however, as opposed to the more specialist care which is proposed to be operated within much of the proposed facility. The appellant has indicated that residential care would be provided on the ground floor with the memory care/dementia care on the first floor and nursing care on top floor. This represents a broad split of one third for each type of care with the opportunity for residents to enter at any level and/or progress through these as required in the same location.

16. The requirement for specialist care, which includes memory care/dementia and nursing care remains high and the varying reports broadly indicate that there is a present shortfall and this is likely to increase in the period to 2042. The County Council's response does reflect this, and it indicates that it did not support the provision of residential care. The County Council was nevertheless supportive of the other forms of care which represent two thirds of the proposed facility.

17. I am mindful here that the operating model for this facility is one that allows for an evolution of care in-situ depending on the needs of the individual resident. The residential care and specialist care are therefore somewhat inalienable in this context.

18. Therefore, whilst it has not been shown that there is demonstrable unmet need for residential care, I am satisfied that there is a clear and demonstrable unmet need for specialist care. Given that the two are inextricably linked in this instance, and that the latter makes up the majority of the care home offering, I am satisfied that this meets the test of paragraph 155 b of the Framework.

Appeal Ref: APP/A1720/W/24/3347627

Date: 8 July 2025

Address: Land South of Longfield Avenue, Fareham

Proposal: 80 bed care home plus up to 1200 new homes, primary school etc

Secretary of State Decision

36. The Secretary of State agrees with the Inspector at IR11.164 that the proposal would provide considerable economic environmental and social benefits including the delivery of affordable housing, extra care accommodation and market housing.

48. Weighing in favour of the proposal are housing (market housing, affordable housing, self and custom build housing and specialist housing);

Appeal Ref: APP/P0240/W/24/3357260

Date: 16 July 2025

Address: 91 London Road, Sandy, Bedfordshire, SG19 1DH

Proposal: 80 bed care home

47. It is common ground between the parties that the appeal proposal would equate to the release of 42 homes back into the housing market. This figure has been calculated on a 1:1.9 ratio as adopted by the Council in response to the Housing Delivery Test Measurement Rule Book, and I have no reason to disagree with it. However, as the extant planning permission¹ for housing on the site would not be deliverable should the appeal proposal come forward, and having regard to the loss of the current dwelling on the appeal site, the net increase to the overall supply would be reduced to 34 dwellings. Nevertheless, this represents a moderate contribution to the level of overall supply, and being mindful of the Government's stated desire to significantly boost the supply of housing set out at paragraph 61 of the Framework, this is a benefit of the proposal.

48. The Council's most recent evidence indicates that there are currently 576 nursing and care home spaces for older people in the area, with demand rising to 641 over the period to 2030. The appellant's Care Home Needs Assessment identifies that there would be a shortfall of 146 care home bedspaces by 2030.

49. While there is some difference in the extent of the expected shortfall, the parties agree that there is a significant need for additional care home bed spaces in the area, and the 80 care home spaces which the appeal proposal would provide would represent a significant contribution towards addressing any shortfall. This is a further benefit of the proposal.

50. Additionally, the proposal would deliver short term economic benefits during construction, and longer-term benefits following occupation in terms of servicing needs and employment.

51. Therefore, even if I were to find that the Council cannot demonstrate an adequate five-year supply of housing land, there are no adverse effects which would significantly and demonstrably outweigh the benefits of granting planning permission in this instance.

Appeal Ref: APP/M3645/W/25/3359711

Date: 09 September 2025

Address: The Grasshopper Inn, Westerham Road, Westerham, Surrey TN16 2EU

Proposal: 63 bed care home

38. The proposal would provide 63 residential care home beds for older people, providing both general purpose and dementia care, with 24-hour care and supervision for residents aged 65+ years. The proposal would also provide generous, good quality internal and external amenity areas which could be utilised by residents.

39. The appellant's Planning Need Assessment identifies an estimated under-supply of 87 additional standard wetroom care home beds within a five mile market catchment area. The shortfall is anticipated to increase to 148 by 2032. It is outlined that the proposal would address nearly 75% of the shortfall up to 2027.

40. The need to provide housing for older people nationally is critical as set out in the National Planning Practice Guidance (PPG). There is no doubt that there is a clear need for this type of development in Tandridge. Consequently, the cumulative benefits associated with the provision of a care home providing general needs and dementia care are afforded substantial weight.

41. The proposal would create employment, and would also give rise to some economic benefits during the construction phase and would provide support to local services. Therefore, the economic benefits are afforded moderate weight. The appellant has referred to environmental benefits, however as these have not been quantified I have afforded them limited weight.

47. The proposal would provide 63 care beds, addressing a need for this type of residential accommodation in the Tandridge area. The appellant states that the Council's Housing Land Supply is 1.57 years. This suggested figure has not been challenged by the Council and is a notable shortfall against the five year housing land supply sought by the Framework.

Appeal Ref: APP/U1430/W/24/3354261

Date: 29 September 2025

Address: Moorhurst, Main Road, Westfield TN35 4SL

Proposal: 64 bed care home

11. Set against this windfall approach to care home provision is the established need for care homes in the district. The Council's planning committee report indicated that including figures up to the end of 2023, there were planning permissions for 154 care home bed spaces within the market catchment area/local authority area and even if these permissions were all completed, there would still be a need for more care beds. This is supported by paragraph 4.52 of the DASA which states that the East Sussex Bedded Care Strategy and Integrated Estates Strategy 2018 estimates a net need of 250 beds for residential/nursing care to 2027. The appellant also refers to the Housing and Economic Development Need Assessment (updated in 2024) which identifies a need for all types of housing for older people, including an expected need for a further 961 care bed spaces by 2040. The appellant's own Planning Need Assessment is based on the local authority area and a 'market catchment area' based on completed and planned care homes, concludes that there would be a need for additional care beds within the area. I have no substantive evidence before me to the contrary.

39. It has been established that there is a need for additional care-home beds within the district. Framework paragraph 63 states that in the context of establishing need, the size, type and tenure of housing needed for different groups in the community should be assessed and reflected in planning policies. The groups identified include older people, with specific reference to care homes, amongst other forms of accommodation.

40. In accordance with the ratio in the housing delivery test rulebook referred to by the main parties, the scheme would provide the equivalent of 36 dwellings. This would make a meaningful contribution to the Council's housing land supply and would be in line with the Government's objective of significantly boosting the supply of housing and supporting the use of previously developed land. The proposed accommodation would respond to an established need and would expand the choice of specialist accommodation available in the area. It would provide high quality accommodation in excess of Care Quality Commission standards. It would release underoccupied properties for re-occupation and would relieve pressure on publicly funded care homes and care services. Taken together, these benefits attract significant weight in the overall planning balance.

41. There would be moderate economic benefits through the provision of up to 65 FTE jobs directly and indirectly from the proposed development through nursing, care, maintenance and administration. There would be additional temporary economic benefits through the construction process. I attribute this moderate weight in the planning balance.

Appeal Ref: APP/M1520/W/25/3363353

Date: 03 October 2025

Address: 186 Canvey Road, Canvey Island, Essex SS8 0QP

Proposal: New Nursing home

44. The Castle Point Local Housing Needs Assessment 2023 (LHNA) indicates that there were 46 units of older persons housing for every 1,000 older persons in the district aged 75 years or more. This is one of the lowest levels in the country, significantly less than the national average of 120 units per 1,000 people aged 75 or older. The LNHA outlines that there will be a significant increase in the number of people in the district in this age group by 2043, calculating a need for 423 units of dedicated older persons accommodation when applying a rate of 120 units per 1,000 older people. Another care home has recently been built on a former garden centre site nearby, but the proposed nursing care home would provide a further 20 bedrooms, contributing towards the provision of older persons accommodation in an area where there is substantial need. I accord this benefit significant weight.

46. There would also be some economic benefits during the construction phase and once occupied when the development would create jobs and opportunities for local businesses. Given the scale of the scheme relative to the wider borough economy, this benefit carries little weight.

47. I have found that the delivery of nursing care home accommodation carries significant weight in favour of the proposal. There would be more modest benefits in terms of its contribution to housing land supply and limited benefits to the local economy. On the other hand, I have found that the proposal would cause harm to the significance of the grade II listed Dutch Cottage and recognise that this must be given great weight. However, the effect would be limited. In terms of the balance required by paragraph 215 of the Framework, I consider that the public benefits would outweigh the less than substantial harm to the heritage asset.

Appeal Ref: APP/T3725/W/25/3362421

Date: 10 October 2025

Address: Land to the south of Birmingham Road, Hatton Park, Warwick, Warwickshire, CV35 7DZ

Proposal: 75 bed care home

29. Within the district, the appellant's Dementia Care Home Statement (DCHS) details a substantial shortfall of extra care beds of between 506 and 781 bed spaces for 2020. With an aging population, this shortfall will increase to between 1,341 and 1,616 bed spaces by 2040. Within north Warwickshire, there is no extra care home facilities and for 2020, a shortfall of some 179 spaces is projected. The recent Coventry and Warwickshire Housing and Economic Development Needs Assessment (HEDNA) estimates a lower requirement of 243 beds by 2032. It takes a different approach in predicting future bed space requirements by assuming a greater focus on providing care within homes. The appellant's DCHS review considers the HEDNA prevalence rate used (people needing beds with nursing) and the assumptions about a higher rate of delivery, for housing with care, to be lacking evidence based justification. Critically, it is unclear how dementia care needs have been assessed which contrasts with DCHS, that utilises specific evidence from Dementia UK. On this later point, it is therefore of greater weight in assessing need for the proposed care home, with its focus on dementia.

30. An Alternative Site Assessment (ASA)⁹, analyses alternative sites but concludes none are suitable and available for development. In the absence of contrary evidence, the ASA further reinforces the need justification for the proposal. The proposal for 75 care beds would make a positive contribution towards meeting need for specialist housing for older people as an identified in the Council's Strategic Housing Market Assessment 2012 under WDLP Policy H5. Planning Practice Guidance (PPG) indicates that the need for elderly persons housing is critical. The proposal would address needs of groups with specific housing requirements under Framework paragraph 61. Taking into account the DCHS evidence, significant weight is attached to the provision of 75 care beds in contributing to need.

32. The care home would reduce the demand on the use of publicly funded hospitals, GP services, publicly funded care homes, social services and health authorities. Residents would benefit from improvements in their health which would reduce service demand and time spent in hospital. Based on

research, the provision of 75 bed care home could result in Council care budget savings of £225k per annum and NHS savings £500k per annum. Such a benefit would attract moderate weight.

34. Construction and care home jobs on a range of salaries and scales would be created. Such jobs, along with servicing requirements for the home and its residents, would result in financial spend within the local economy. Given the extent of development, this economic benefit would attract moderate weight.

39. Set against this, there would be significant weight attached to the number of care home beds being created. The proposal would boost housing supply attracting moderate weight and the reduced demand on social and health services and associated cost savings would attract moderate weight. Similar weight would be attached to the economic benefit of the proposal...

40. Therefore, whilst the benefits of the proposal would cumulatively be great and weigh heavily in favour of the proposal, they would not outweigh the heritage harm for each of the balances for the Conservation Area and listed building...

44. The provision of care home beds would attract significant weight. The benefits of housing, economy, reduced demand on social and medical services and associated cost savings would each attract moderate weight. The benefits on people wellbeing and the creation of a footpath would each attract small weight.

47. The benefits of the provision of care home beds, housing, economy, reduced demand on social and medical services with associated cost savings, people wellbeing and the creation of a footpath would weigh heavily in favour of the proposal. Limited weight would be given to the proposal not conflicting with Green Belt purposes a and b. However, in addition to the harm to the Green Belt, there is 'less than substantial harm' to the Conservation Area and the setting of a listed building which individually attract considerable weight.

Appeal Ref: APP/W3520/W/25/3364061

Date: 15 October 2025

Address: Land at School Road, Elmswell IP30 9NL

Proposal: 66 bed care home and extra care

28. The development would provide such benefits through the provision of a range of specialist elderly housing, some of which would be affordable, which would meet an identified and critical need. I appreciate the difficulties in delivering this type of housing and the Inquiry was told this is the only pending application of its type currently in the District. This development would also result in wider public benefits of better health and wellbeing and freeing up family housing. A minibus service, communal facilities and a healthcare facility could also be secured for the use of future residents. Such benefits carry significant weight having regard to the scale of development proposed.

30. There would be economic benefits stemming from the development through job creation, both short-term and long-term, and from additional spending to the local economy. The scheme could also secure a high level of environmental benefits through a secured biodiversity net gain. New hedgerows, as a heritage benefit, however, as discussed above, I give limited weight for the reasons already given.