



SURREY  
COUNTY COUNCIL

# Planning guidance for accommodation with care for older people

April 2024



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# Introduction

Surrey County Council's [Accommodation with Care & Support Strategy](#) is set out in item 16 of a Cabinet report of 16 July 2019, and presents the overarching approach for all accommodation based services we commission and provide for residents of Surrey.

It is an ambitious programme for a more diverse range of accommodation with care options for people with a range of disabilities and needs, with the aim of maximising their independence, choice and control. It will allow people, regardless of their financial circumstances, to access settings where the built environment and on-site support can address their current and future needs, and this will reduce the risk of hospital admissions and having to access more restrictive environments as a result of crisis.

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 Accommodation with Care & 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.

## Scope of this document

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.

Surrey County Council is mindful of the [National Planning Practice Guidance](#) for housing for older and disabled people (NPPG), which states that the "need to provide housing for older people is critical", and of its requirement for planning authorities to take into account of the need for this area of specialist housing specifically alongside other future housing needs.

In order to provide guidance to existing providers of care and support, prospective developers and the planning authorities in the Surrey County Council area, this document will therefore:

- Set out the various typologies of specialist housing for older people
- Define extra care housing in detail as a housing with care model
- Examine the planning context regarding extra care housing
- Present a methodology for calculating the need for extra care housing across all tenures
- Present a methodology for calculating the need for residential and nursing care, which considers the impact of the Accommodation with Care & Support Strategy

The statistics will be set out separately in profiles for each Borough and District area of Surrey.

# The specialist accommodation options for older people

Older people currently have a range of specialist accommodation options that may be available for them. The key types, beyond age restricted general housing, are set out below and elaborate on the descriptions in the [National Planning Practice Guidance](#) for housing for older and disabled people.

<b>Type of accommodation setting</b>	<b>Retirement Housing (Sheltered Housing, Retirement Living, Senior Living etc)</b>	<b>Extra Care Housing (Assisted Living, Integrated Retirement Communities etc)</b>	<b>Residential Care Homes &amp; Nursing Homes</b>
<b>Accommodation arrangements</b>	Self-contained homes for ownership, shared-ownership or rent as part of a wider setting	Self-contained homes for ownership, shared-ownership or rent as part of a wider setting	Communal residential living with residents occupying individual rooms, often with an en-suite bathroom.
<b>Support model</b>	Housing only	Housing with Care	Care facility
<b>Planning classification</b>	C3	C2 or C3	C2
<b>Referral process (where affordable)</b>	Local allocation policy of housing authority	Through nominations agreement between operator, care authority and housing authority	Direct contact from person needing a care home place or their representative.
<b>Occupancy rights</b>	Ownership / shared-ownership – leasehold rights. Rental arrangements – tenancy rights, or almshouses’ licences to occupy with equivalent rights. Can only be evicted through breaching the agreement.	Ownership / shared-ownership – leasehold rights. Rental arrangements – tenancy rights, or almshouses’ licences to occupy with equivalent rights. Can only be evicted through breaching the agreement.	Rights as set out in licences to occupy, which reference accommodation and care arrangements together. 28 days’ written notice to leave at any point is deemed reasonable.
<b>Regulation</b>	For affordable/social rent and shared ownership only: Regulator of Social Housing	Housing management (for affordable/ social rent and shared ownership only): Regulator of Social Housing	Care Quality Commission

		Dedicated care provider: Care Quality Commission	
<b>Typical facilities</b>	<p>Communal lounge Laundry facilities Gardens Guest room Mobility scooter parking/charging</p>	<p>Extensive. The following are common elements: Restaurant /café Activity rooms/spaces Communal lounge Hairdressers Gardens Guest room Mobility scooter parking/charging</p>	<p>Communal lounge Laundry facilities Gardens Guest room</p>
<b>Support arrangements</b>	<p>Warden assistance – part-time or full-time office hours Emergency call systems Limited or no dedicated care service Individual tenants purchase any care and support from the care market</p>	<p>24 hour on-site staff who can respond to emergency calls Dedicated care service working in partnership with housing management. Tenants with care needs can choose an alternative care provider if they wish</p>	<p>24 hour on-site care and support staff. Nursing care home has registered nurse on-site at all times. Meals etc included and paid for as part of occupancy.</p>

## Extra care housing

“Extra care housing” is an umbrella term – while it is commonly used as a direct description for suitable settings delivering publicly funded housing and support, other terms such as “assisted living”, “retirement village” and, most recently, “integrated retirement community” are regularly used by operators of settings whose residents are privately funded.

Regardless of the name used to describe a setting, there are common elements to developments which lead them to be defined as “extra care housing”. In “[Extra care housing: What is it?](#)” the Housing Learning and Improvement Network (Housing LIN) provides the following broad definition of extra care housing:

“Extra care housing is housing with care primarily for older people where occupants have specific tenure rights to occupy self-contained dwellings and where they have agreements that cover the provision of care, support, domestic, social, community or other services. Unlike people living in residential care homes, extra care residents are not obliged as a rule to obtain their care services from a specific provider, though other services (such as some domestic services, costs for communal areas including a catering kitchen, and in some cases some meals) might be built into the charges residents pay.”

Alongside this the NPPG is also of key importance in helping to define what extra care housing is in comparison to other specialist housing typologies. While the NPPG equates extra care housing with “housing-with-care”, the model is presented as one which:

“... 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.”

ARCO, as the representative body for (mainly) private operators of housing with care settings, has coined the term “Integrated Retirement Community” for the sector it represents, after extensive market research and engagement with older people. It sets out the key features of an “[Integrated Retirement Community](#)” on its website. A brief summary is as follows:

Apartment homes are available for purchase, part purchase or rent, alongside a range of choices:

- **Integrated Lifestyle:** Facilities like restaurants, bars, gyms, cinemas, community halls and gardens offer optional activities and social opportunities.
- **Integrated Well-being and Care:** Personal and domestic care can be delivered within people’s homes if they wish. Dedicated staff teams are on site 24/7.
- **Integrated with Wider Communities:** Connections with wider communities through family, friends, intergenerational, volunteering or leisure opportunities are valued and cherished.

Surrey County Council recognises the term “Integrated Retirement Community” as a model of housing with care which is equivalent to “extra care housing”, and sees it as a term usually employed by operators of settings which provide market sale and rental units of accommodation.

## Extra care housing and planning use classes

Determining a planning use of C3 (“dwelling houses”) or C2 (“residential institutions”) for specialist housing settings is challenging for planning authorities. There are elements of extra care housing which may suggest C3, as residents in extra care housing settings have security of tenure and housing rights afforded by their occupancy agreements and cannot be required to move, unless in breach of the occupancy agreement. In addition, residents’ accommodation in extra care housing settings are comprised of self-contained units, and while housing services and care services on-site will be expected to be co-ordinated effectively, in regulatory terms the housing is a separate entity from the care (with the latter subject to regulation by the Care Quality Commission).

When determining the appropriate planning use class for proposed housing with care settings, planners should bear the above definitions of extra care housing in mind alongside the outcomes of previous planning appeal decisions, and then establish whether planning applicants have provided suitable evidence and undertakings to justify a C2 classification for their particular proposals. Conversely, planning applicants should understand that planning authorities may make default assumptions that self-contained accommodation is C3, and so, if C2 is sought, they will be expected to clearly justify an alternative classification.

Ultimately, any proposal for specialist housing for older people on a C2 planning basis must present substantially more than a housing model on-site, with substantial facilities, staffing and operational support for residents which is clearly more intensive than that found in more mainstream housing settings or in retirement/sheltered housing, and in keeping with the NPPG definition of extra care housing.

C2 planning applications for housing with care settings should cover off the following elements:

Regarding the aim of the setting:

- Is the setting focused on supporting older people with care and support needs? Will the setting have restrictions on occupancy to control access?
- Does the setting anticipate a range of need levels on site, which could include support to people living with dementia?
- How will residents be supported to stay as independent as possible and remain active in old age?
- How will residents be supported to avoid admission into care homes as their needs increase?

Regarding facilities:

- Does the proposed setting have facilities not normally associated with retirement or sheltered housing such as bar/ lounge, kitchen/dining room, laundry, crafts room, IT suite, shop, gym etc?
- Are the communal facilities maintained and funded through the rent and/or service charges paid for by the residents?

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- What facilities are there for care staff to deliver care and support to residents? Does this include an office with space for secure record keeping, potential changing facilities?
- Does the proposed setting have alarm systems for residents to call on support in the case of emergencies, and opportunities for residents to make use of telecare and other assistive technology?
- Does the overall design of the proposed setting respond to best practice in design standards, space standards, layout and accessibility?

For further guidance the [Design Principles for Extra Care Housing](#) produced by the Housing LIN are instructive.

Regarding care and support on site:

- Will 24/7 on-site support be available to all residents? Will this be ensured through residents paying towards this support through service charges, or (in the case of a settings run by Housing Associations) enabled through a care service commissioned by Surrey County Council?
- For emergency care responses, will the setting be able to guarantee a direct response from on-site staff, and if so how?
- Will residents receive/purchase care from an on-site, CQC registered home based (domiciliary) care team based on-site, which will operate in partnership with the future operator?

The background of the developer may also be of interest in planning discussions, and, where the developer has opened similar schemes in other parts of the country, the following questions can be asked:

- What is the average age on entry to existing schemes?
- How much care per week was purchased during the first year of operation?

Where planning applicants can respond to the above, and show how the built environment is designed in a manner which is substantially different to that seen for C3, with a clear focus on care and support as a key driver for the proposal alongside the provision of accommodation, a planning classification of C2 could be considered.

## The accessibility and location of extra care settings

As stated by the [DWELL research project](#) “The preventative agenda often associated with extra-care housing requires a focus on ‘HAPPI’ design quality principles (attractive, accessible, good daylighting and thermal comfort) and links to local infrastructure (facilities, services and social opportunities)”.

### Accessibility

Development proposals for extra care should clearly demonstrate how HAPPI quality principles have been used in the design of buildings and their environments. Alongside this, given the range of care and support needs that need to be accommodated on extra care sites, proposals



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should be accessible to people who use wheelchairs and allow for adaptations to accommodate them. While individual units of accommodation should meet the Building Regulations Part M, category 2 standards as a minimum, it would be ideal for Part M, category 3 to be factored into development proposals too.

The level of accessibility should be evident throughout the extra care setting – both with regard to internal and external areas on the site. In addition, as any extra care setting should meet a variety of needs it should evidence how people will:

- Be able to access local facilities through a choice of accessible transport options.
- Be able to leave and return to the setting without facing barriers (e.g. settings located on a hill or other gradients will automatically present challenges for people who have difficulties walking or who use wheelchairs). This includes clear access to transport options, e.g. paths and roads with pavements which will allow residents to safely walk to nearby bus stops.

## Proximity to local facilities

The [guidance on Housing for Older and Disabled People](#) from the Department of Levelling Up, Housing & Communities stresses that the location of specialist housing is very important for older people when downsizing or moving into more supportive environments, and extra care housing is no exception to this rule:

“The location of housing is a key consideration for older people who may be considering whether to move (including moving to more suitable forms of accommodation). Factors to consider include the proximity of sites to good public transport, local amenities, health services and town centres.”

Within any extra care planning application it should therefore be evident that the setting will not only enable people to create a new community with their new neighbours on-site, but that the setting is sympathetic and supportive of people maintaining their links with the wider community.

## Close care settings

“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”.

In order for such a determination to be made, Surrey County Council recommends that any planning authority should follow the above guidance in “Extra care housing and planning use classes”, and establish how this applied specifically for the residents living outside the care home in a close care setting. A C2 planning proposal for a close care setting should therefore:

- Be clear on the obligations on the part of the care home to deliver care and support and facilities to the external housing residents. This should include operational

Planning guidance for accommodation with care for older people considerations to meet their needs alongside the needs of the care home residents, e.g. levels of facilities at the care home, staffing levels etc, CQC regulation where the care home delivers support to people's individual homes.

- Specify the levels of communal facilities that the housing residents in the close care setting will have access to, and where. It should be assumed that these are available to them on the same basis as for residents elsewhere in extra care housing.
- Define how the housing residents will be supported to remain as independent as possible, with care delivered to their homes as they need it alongside an emergency response service
- Set out contingency plans for when any care and support may be temporarily unavailable from the care home to the housing residents at the setting (e.g. as during the Covid-19 pandemic)

Overall, planning applications with a mix of provision should not be treated as a whole just because a clearly C2 development (such as a care home) forms an element of the site.

## Enhanced sheltered housing

“Enhanced sheltered housing” has been used as a term to define housing settings which may deliver additional services above what is typical for retirement/sheltered housing, but not to the extent of a housing with care model as defined by NPPG, the Housing LIN or by ARCO.

While such settings may have a value in presenting a housing option to older people, with lower cost considerations but a lower level of intensity of support available than extra care housing, they are unlikely to be recognised as C2 “residential institutions”. The [Elderly Accommodation Counsel](#) has the following definition for enhanced sheltered housing, which shows the limitation of the housing typology in meeting people's changing housing and care needs:

“[A setting which] provides residents with the independence of having their own front door and self-contained flat whilst also having access to some on-site support service. Most developments will have scheme manager and alarm systems in the property, there may also be some personal care and home help services that can be arranged by the management.”

The Housing LIN categorised enhanced sheltered housing provision within “housing for older people”, describing it as a term “now used by very few social landlords” in its planning advice to [Hart District Council of June 2021](#). In addition, an appeal decision on 14 December 2023 (regarding [an outline planning application to Mole Valley District Council for an Integrated Retirement Community](#)) agreed with the planning authority that enhanced sheltered housing is a sub-set of sheltered housing and it “should not, therefore, be included in any quantitative calculation of need for the proposed [Integrated Retirement Community].”

As a result of this, Surrey County Council will not agree with the analysis of needs assessments which factor enhanced sheltered housing needs calculations in with the equivalent for extra care housing/housing with care. This is particularly the case for planning applications seeking permission for a C2 use class development.

# Establishing the future need for extra care housing

There have been various methodologies devised over the years to determine the future need for extra care housing, or housing with care.

In Commissioning Statements published in April 2019, Surrey County Council used an [approach taken by the Housing LIN](#). This methodology states that:

“...demand for extra care is likely to be required at 25 units per 1,000 population aged 75 plus [...]. The desired tenure mix will vary according to local and market factors.”

However, in reflecting on this approach, particularly in the context of market shifts in housing with care and various planning appeal decisions taken in the subsequent five years, an alternative methodology is now regarded as most suitable. This alternative has been referenced by the Housing LIN in its [Housing in Later Life](#) toolkit, as part of a wider approach to determining a variety of older people’s housing needs.

The methodology sets out the following broad prevalence levels as estimates of need, calculated as per 1,000 of the relevant 75+ population in an area:

- Sheltered housing – 180
- Enhanced sheltered housing – 20
- Extra care housing – 45

Of the total need figure for extra care housing of 45 per 1,000 of the relevant 75+ population, a further split (corresponding to the dynamics of the Surrey housing market) has been calculated based on whether provision is:

- “Affordable” (i.e. rental units fundable through housing benefit or shared ownership properties, with settings operated by a Housing Association regulated by the Regulator of Social Housing). This is determined as 10 per 1,000 of the relevant 75+ population.

or

- “Market” (i.e. private rental or leasehold units, with settings managed by private operators). This is determined as 35 per 1,000 of the relevant 75+ population.

The split of need figures into “affordable” and “market” is broadly based on the tenure split of home ownership in Surrey, as set out in the [2021 census](#), with an assumption that rates of home ownership are higher amongst older age groups.

The resultant need figures are set out in individual profiles for each of the Borough and District areas of Surrey, alongside need figures for residential care and nursing care. The relevant 75+ population for 2024, 2030 and 2035 are based on population statistics produced by [Projecting Older People Population Information](#) (POPPI) with reference to the latest ONS projections published on 24 March 2020.

As Surrey County Council’s Accommodation with Care Strategy is highly ambitious in shifting away from residential and nursing care being the default models of care beyond mainstream

Planning guidance for accommodation with care for older people housing, planners should regard the affordable need figures to be achieved as **minimum** targets.

## Residential and nursing care homes

While the residential care and nursing care home market is arguably as diverse as the one for extra care, defining these settings is made simpler by the fact that they are regulated as institutions by the Care Quality Commission (CQC) and their planning classification is C2.

CQC defines a care home in its [guidance for service types](#) as:

“...a place where personal care and accommodation are provided together. People may live in the service for short or long periods. For many people, it is their sole place of residence and so it becomes their home, although they do not legally own or rent it. Both the care that people receive and the premises are regulated.”

The key difference between residential care homes and nursing care homes is the 24 hour presence of nursing staff in the latter settings. Residential care homes are therefore referenced by CQC as “care homes without nursing” while nursing care homes are called “care homes with nursing” in their list of service types.

## Establishing the future need for residential care home and nursing care home provision

Presenting clear need figures for residential care and nursing care in any area is problematic:

- There is no single, recognised methodology for identifying future residential and nursing care need
- Local need figures need to take into account Surrey County Council’s strategic direction to maximise the impact of preventative services, provide additional support to carers and to diversify the range of community support on offer, so that people are able to live in their own homes for longer.

These measures (including the implementation of the Accommodation with Care and Support Strategy) mean that a link between demographics and residential and nursing care provision should not be assumed.

- 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
- There is a concern amongst local NHS partners that, should nearby areas have relatively low levels of residential and nursing care, the building of more residential and nursing care homes in an area may lead to an “influx” of new patients from those nearby areas and create additional strain on the local health system.

On reflection of the above points, Surrey County Council presents a methodology which:

- Calculates the current provision of residential care homes and nursing care homes in the Surrey Borough and District areas on the basis of [CQC lists of regulated services](#) as at 5 January 2024, filtered for the provision of care to older people and people with dementia

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- Compares the level of residential and nursing care capacity to the local 75+ population in the Surrey Borough and District areas. While the population statistics have been produced by [Projecting Older People Population Information](#) (POPPI) with reference to ONS projections published on 24 March 2020, the comparison is set out as a ratio of beds per 1,000 of the 75+ population.
- The above ratio is then set alongside the equivalent ratio for England and to ratios for neighbouring authorities to Surrey's Borough and District areas, following the same process as above.
- Indicative forecasts of future needs for residential and nursing care, in Surrey's Borough and District areas and their neighbouring authorities, are then calculated with reference to achieving England's current ratio of care home beds in 2030 and 2035
- 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. The overall effect on Surrey's need for residential care is set out in [item 16 of the Surrey County Council Cabinet report of July 2019](#). The Borough and District calculations have been made by pro-rating the average reduction on residential care home beds through the local gaps in need for affordable extra care housing.

The resultant need figures are set out alongside the needs statistics for extra care housing in individual profiles for each of the Borough and District areas of Surrey. The relevant 75+ population for 2024, 2030 and 2035 are based on population statistics produced by [Projecting Older People Population Information](#) (POPPI) with reference to the latest ONS projections published on 24 March 2020.

## The effect of care home closures and developments on need figures

Where an ongoing need for residential or nursing care is identified, it is desirable that released sites from any care home closures will be redeveloped with appropriate replacement care provision or with an alternative that clearly supports the strategic objectives of Surrey County Council's Accommodation with Care Strategy. However, it is recognised that there may be instances where this may not be feasible or viable.

Planners should also, in overseeing the levels of specialist housing and care home provision in their authority areas, monitor any changes in their local care home and specialist housing provision with Surrey County Council and re-evaluate the need figures to respond to future planning applications.