



GRAVIS
PLANNING

BELFAST | DUBLIN

13th November 2018

Our Ref: C03580

Keith Sutherland
Development Planning and Policy Manager
Belfast City Council
Cecil Ward Building
4-10 Linenhall Street
Belfast
BT2 8BP



Dear Mr Sutherland,

Re: Response to the Belfast City Council Draft Plan Strategy (DPS) – Lands located along the Ballygowan Road, Castlereagh

This letter is submitted on behalf of our client, Kilmona Holdings Ltd., and relates to the publication of the Draft Plan Strategy (DPS), the second stage in Belfast City Council's Local Development Plan process. It highlights how some draft policies are not sound and proposes how such policies could be amended to become sound. In addition to this we draw your attention to specific lands that we have identified as being suitable for inclusion within the settlement limit in order to contribute to the ambitious growth plans for Belfast as set out in the strategy.

Development Plan Practice Note 6 sets out 3 main tests of soundness for Local Development Plans, with each test having a number of criteria, as follows:

Procedural Tests

- P1 *Has the DPD been prepared in accordance with the council's timetable and the Statement of Community Involvement?*
- P2 *Has the council prepared its Preferred Options Paper and taken into account any representations made?*
- P3 *Has the DPD been subject to sustainability appraisal including Strategic Environmental Assessment?*
- P4 *Did the council comply with the regulations on the form and content of its DPD and procedure for preparing the DPD?*

Consistency Tests

- C1 *Did the council take account of the Regional Development Strategy?*
- C2 *Did the council take account of its Community Plan?*
- C3 *Did the council take account of policy and guidance issued by the Department?*
- C4 *Has the plan had regard to other relevant plans, policies and strategies relating to the council's district or to any adjoining council's district?*

Coherence and Effectiveness Tests

- CE1 *The DPD sets out a coherent strategy from which its policies and allocations logically flow and where cross boundary issues are relevant it is not in conflict with the DPDs of neighbouring councils;*
- CE2 *The strategy, policies and allocations are realistic and appropriate having considered the relevant alternatives and are founded on a robust evidence base;*
- CE3 *There are clear mechanisms for implementation and monitoring; and*
- CE4 *It is reasonably flexible to enable it to deal with changing circumstances.*

POP Summary

We previously highlighted in our POP representation concerning these lands that our client was in full agreement with the ambitious economic and housing growth aspirations set out by the council. We noted and supported the council's acknowledgement that not all of the housing allocation could be delivered in the city centre and other options would be to explore new development opportunities on the edge of the settlement limit. The subject lands occupy such a position. We suggested that policy LP1 was simplified to fall better in line with the SPPS sequential approach in identifying suitable sites for housing. We also suggested that in relation to policy LP2 that a clear distinction was made between social and affordable housing. In respect of policy LP4 specialist accommodation, we suggested that the planning history of the site should also be included within the criteria. A commitment to delivering this form of development has been demonstrated by virtue of the previous planning application (Y/2014/0015/O) for such a use on the subject lands.

Belfast City LDP 2035

We are pleased to read on para 1.2.3, page 4 of the DPS that Belfast City understand the role of the Local Development Plan in facilitating growth by coordinating public and private investment to encourage development where it can be of most benefit to the wellbeing of the community. The subject lands present such a development opportunity where real benefit to the wellbeing of the community could be achieved. It has been demonstrated through previous planning applications on the site that there is a need for specialist housing for older people in this area and therefore it is clear that if the site was developed it could bring exceptional benefit to the wellbeing of the community by satisfying a need in the area. The lands are also strategically located along a city corridor, as identified in the DPS Fig. 5.2, page 51, where public transport is available providing a direct link to local centres.

Strategic Aims

On p25, the Draft Plan Strategy sets out four strategic aims to help realise the vision for the city in 2035:

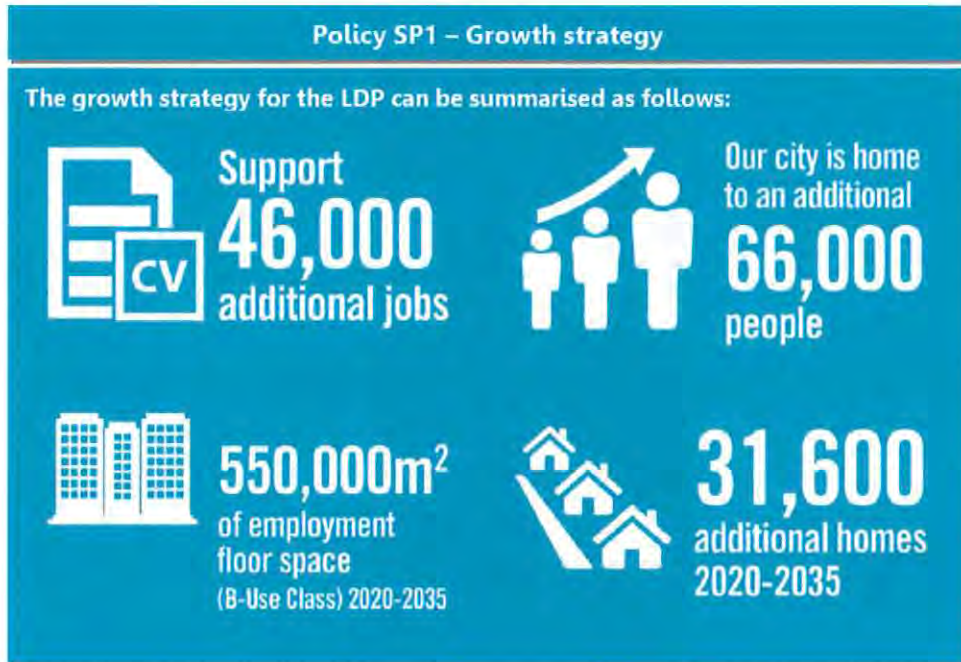
- Shaping a Liveable Place
- Building a smart connected and resilient place
- Creating a vibrant economy

- Promoting a green and active place

We **support** these aims.

Starting at page 34 the Draft Plan Strategy sets out eight strategic policies for the Local Development Plan. Comments are provided below in respect of SP1.

Policy SP1 - Growth Strategy



Belfast City Council propose ambitious economic growth plans, which seek to add a further 46,000 jobs to the economy over the period 2020-2035 in line with the city’s objective to enable it to compete with similar cities elsewhere in the UK in terms of attracting investment, creating jobs and driving the regional economy (Policy SP1, Belfast City Council Draft Plan Strategy, January 2017, p34-35). This proposed economic growth therefore influences the growth of the population and in turn the level of residential development required to support this growth. Belfast City Council therefore proposes to grow the population by 66,000 which in turn will require the development of an additional 31,600 homes over the plan period 2020 - 2035.

We are generally supportive with Belfast City Councils Policy SP1 Growth Strategy for supporting economic growth as enhancing Belfast’s economic prosperity will raise the growth of the region as a whole, ultimately encouraging more individuals to work and live within the city, strengthening the role of the Belfast as the regional capital of Northern Ireland. However, we are disappointed to see the target number for additional homes required within the Council area being downsized from 37,000, as set out in the Preferred Options Paper, to 31,600 as set out within the Draft Plan Strategy. The 31,600 additional homes target for the 15 years of the plan period does not provide a 5 year over supply to ensure there is no shortfall in the supply of housing over the plan period. The original housing growth figure of 37,000 is therefore a much more robust figure for housing growth across the district and would allow for unexpected growth during the plan period.

Therefore, we would encourage the council to revert back to their original figure of 37, 000 additional homes for the district by 2035 as set out in the Preferred Options Paper.

Soundness Test

- The Growth Strategy (Policy SP1) is not sound as it is not reasonably flexible to enable it to deal with changing circumstances (Test C4). The reduction in the projected housing growth, from 37,000 to 31,660, limits the flexibility of this policy’s ability to deal with unexpected growth.

Remedy

- Return to original projected housing figure (37,000) from the Preferred Options Paper.

Policy SD 1 - Settlement Hierarchy

Policy SD1 – Settlement hierarchy		
The Belfast district consists of four settlements.		
Classification	Role and function	Settlement
Principal City	The regional centre for administration, specialised high order services and cultural amenities. It is the regional gateway with links to other European cities, and provides the largest transport hub for NI.	Belfast City
Small Settlements	Distinct rural settlements in the countryside. They provide a focal point for the rural community, and have a number of local community facilities and services.	Edenderry Hannahstown Loughview

On page 47, the Draft Plan Strategy sets out the spatial development strategy for the plan, including a proposed Settlement Hierarchy (Policy SD 1). The hierarchy proposes Belfast City as the Principle City with Edenderry, Hannahstown and Loughview identified as Small Settlements. We **support** this hierarchy of the settlements, with the majority of population and economic growth being directed to Belfast as the principle city. The proposed settlement hierarchy encourages sustainable development by reducing the need to travel with the population concentrated close to employment and key public transport corridors.

Policy HOU1 – Accommodating new homes

Policy HOU1 – Accommodating new homes

There is a requirement for 31,660 new homes in Belfast over the period 2020-2035. This will be delivered in accordance with the requirements set out in the following table.

Settlement / Area		Net additional dwellings (2020-2035)
Belfast city	Belfast city centre	8,000
	Belfast Harbour estate	3,500
	Rest of Belfast city	18,100
	<i>Belfast city Total</i>	<i>29,600</i>
Small Settlements	Edenderry	40
	Hannahstown	0
	Loughview	20
	<i>Small settlements total</i>	<i>60</i>
Windfall		2,000

The housing requirement will be delivered in accordance with the following indicative average annual rates:

- 2020/21–2024/25 – an average of 1,100-1,300 dwellings completed per annum
- 2025/26–2029/30 – an average of 2,100-2,300 dwellings completed per annum
- 2030/31–2034/35 – an average of 2,700-2,900 dwellings completed per annum

We would encourage the council to reconsider the provisions of this policy. At present there is a disproportionate lack of sites zoned for housing in East Belfast with the vast majority of existing housing zonings now built out. In addition, we would argue that it may be difficult to achieve the majority of the allocation within Belfast City as a city centre location is unlikely to yield family sized homes, which are the most in demand housing types.

In para 7.1.9, page 61, the council allude to the potential that land may be phased to ensure the alignment of housing delivery with planned infrastructure investment and development lead-times. We would strongly object to the introduction of the phasing of housing land and firmly believe that the market is best placed to decide which sites are developed first.

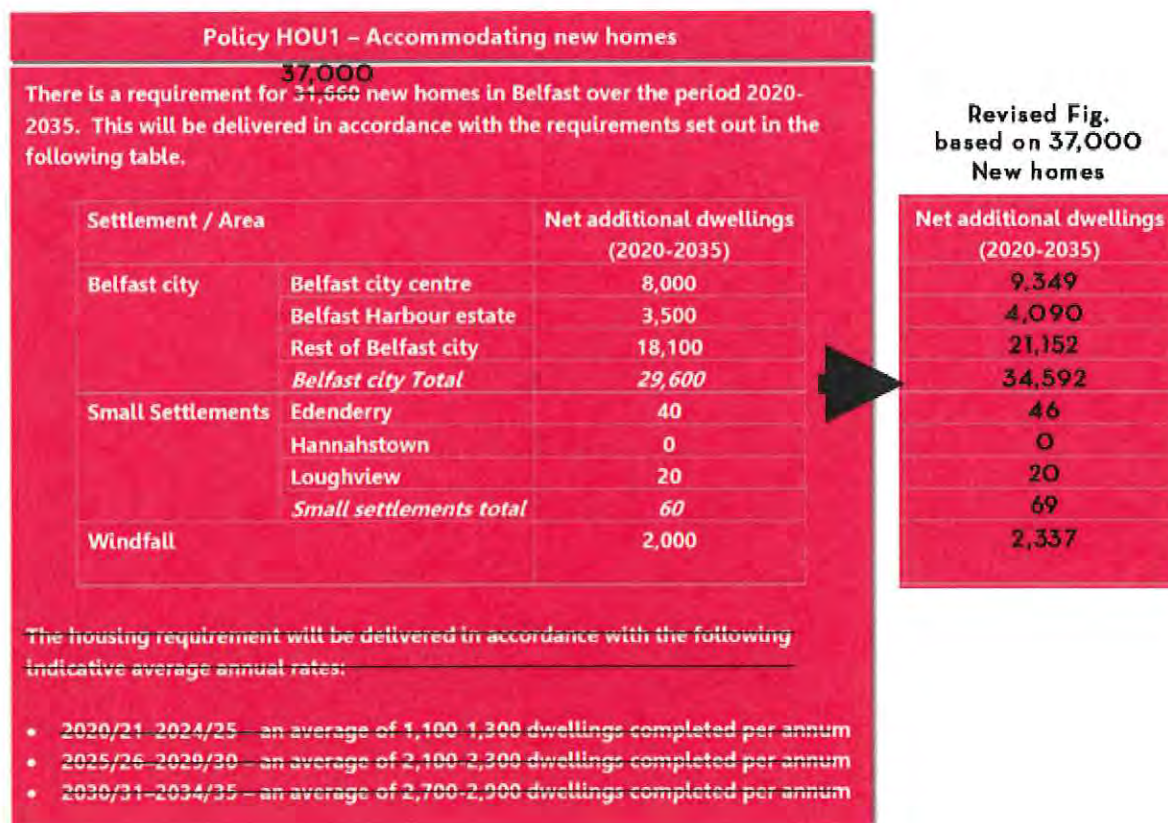
The table below highlights the remaining housing zonings within the vicinity of the subject site. All of these zonings are now built out, committed housing sites or there is no evidence of intention by the landowner to develop the site. There is clearly a lack of currently zoned land available within this part of the city and therefore a need to zone additional land suitable for family sized dwellings in order to meet the demand in this area for housing during the plan period.

Table 1 – Existing Housing Zonings (BMAP 2015) within the vicinity of the subject site

Ref	Site	Size	Status
MCH 04/01	Land adjacent to 111 Lower Braniel Road	0.19 ha	No evidence of appetite to develop
MCH 04/03	1 Gilbourne Court, Tullycarnet	0.28 ha	Committed - Permission Y/2005/0344/RM - 15 Apartments - Commenced
MCH 04/04	Land to the rear of 106-118 Knockbreda Road, Lisnasharragh Park	0.34 ha	No evidence of appetite to develop
MCH 04/06	Land to the rear of 6-10 Glenview Park, Ballygowan Road	0.46 ha	No evidence of appetite to develop
MCH 04/07	Land at Church Road/Ballygowan Road	1.03 ha	Built out
MCH 04/14	Land at Lower Braniel Road	6.54 ha	Committed - Planning Permission - LA04/2017/0510/RM

In some cases, zoned sites may never be developed, as demonstrated by the table above. A phased approach to development could prevent other, more suitable and viable sites from being developed.

The policy should also be updated to reflect the original target for new additional homes (37,000) as set out in the Preferred Options Paper. The 37,000 new homes target should be redistributed on a pro rata basis to the various settlements/areas (see below). The housing requirement rate element of the policy should be removed from the policy, as recent land uptake in this area coupled with the land of available zonings could actually mean higher demand with the first 5 years of the plan. These 5-yearly targets could still be kept to monitor the performance of the plan in delivering housing but it should be removed from the policy itself.



Soundness Test

- This policy is contrary to soundness test CE4 in that it is not flexible. The proposed housing allocation figure of 31,660 in the DPS does not include a 5 year over supply of housing and is therefore not flexible and able to respond to unexpected growth during the plan period.
- In addition, the policy sets out what the delivery of housing will be on a 5-yearly basis, with delivery increasing towards the end of the plan period. This is also an inflexible approach. Especially, in the event, as stated previously, of the council area experiencing a higher than anticipated level of growth in the first 5 years of the plan.

Remedy

- The council should revert back to the housing growth figure of 37,000 as set out in the Preferred Options Paper.
- The council should remove the section of the policy which stipulates average annual figures for the delivery the housing requirement.

Policy HOU4 – Density

Policy HOU4 – Density of residential development		
Planning permission will be granted for residential development proposals which are brought forward in accordance with the following density bands:		
Settlement / character area	Average density band (dwellings per hectare)	Locational criteria
Tall buildings within city centre	>350	Locations to be identified
Belfast city Centre	150-350	Within the defined city centre boundary
Inner city Belfast	75-150	As defined within the settlement strategy
Outer Belfast	25-125	Remainder of Belfast city between inner city Belfast and the settlement development limit
District centres	100-200	Within 200m of a district centre
Local centres	75-150	Within 100m of a local centre
City corridor	100 -175 within inner city	50m either side of a designated city corridor
Rail stations and halts	50-150 within outer Belfast	Within 100m of a rail station or halt
Small settlements	25-50	Within the settlement development limits of the small settlements
The above density bands are to be used as a guide to inform proposed developments within the relevant settlement areas and development proposals outside of these broad bands will be considered on their merits. This will be subject to meeting all other policy requirements.		

We **support** this policy and commend the council on proposing a policy that provides flexibility in terms of the range of housing densities that would be acceptable across the district.

Policy HOU5 – Affordable Housing

Policy HOU5 – Affordable housing
<p>Planning permission will be granted for residential development on sites greater than 0.1 hectares and/or containing 5 or more dwelling units where a minimum of 20% of units are provided as affordable housing.</p> <p>Affordable housing should consist of social rented housing and/or intermediate housing. In determining the appropriate mix of affordable housing in terms of size, type and tenure, regard will be had to an up to date analysis of demand, including housing stress and prevailing housing need.</p> <p>The affordable housing should be provided as an integral part of mixed tenure development, integrated with general needs housing and not readily distinguishable in terms of external design, materials and finishes.</p> <p>Where it can be demonstrated that it is not sustainable or viable for a proposed development to meet the requirements of this policy in full, the council will consider suitable alternatives on a case-by-case basis.</p> <p>Affordable housing will be secured by way of section 76 planning agreement, which should be in place in advance of planning permission being granted.</p> <p>Any proposal for housing that is considered to be artificially dividing a larger site to circumvent the affordable housing requirement will not be permitted. Where a concept masterplan is provided to demonstrate the comprehensive planning of such a site and how the full affordable housing obligations will be met, partial development may be permitted if the affordable housing element can be secured by way of s76 planning agreement. This will also allow for the phased development of larger sites.</p>

We do not support this policy in its present form.

We consider that the thresholds of a 0.1ha site size and 5 no. units are set too low and that the site size and unit numbers where the affordable housing provision is applicable should be increased. In addition, the expectation that a minimum of 20% of units should be provided as affordable housing is excessive. On page 69, para 7.1.26, the council states that “where it can be demonstrated that it is necessary and viable to provide a higher proportion of affordable housing, the council will expect developments to do so”. This statement undermines the above set thresholds. If this policy is to be retained, the opposite should also apply, i.e. where no need exists then the council should not expect any affordable housing provision within a scheme.

Though the policy has been designed with the aim of delivering affordable housing through the planning process, it will actually only serve to inflate the overall price of the remaining market housing within schemes. Developers will be forced to pass the burden of providing affordable housing within a scheme onto the purchasers of the remaining market housing through increased house prices, to ensure that a scheme remains viable. This, in turn, will also have implications for land values, causing price inflation and this will be to the detriment of the housing market.

This policy, if taken forward, could see developers reducing residential development in general, resulting in fewer housing projects being brought forward and result in affordable housing not being delivered in the volume that was anticipated. This non-delivery of housing development could undermine LDP targets.

The policy will not necessarily deliver affordable housing in the locations where those in need of affordable housing would wish to live. Those seeking affordable housing will often wish to remain within the close knit community where they have grown up and where family ties are strong. The policy in its current form would seek to provide affordable housing on a blanket basis, whether needed or not, spread across the district. There is therefore a need for a more targeted approach, based on NIHE areas of demand.

The policy does not explicitly state that the affordable housing requirement could be delivered off-site as an alternative to providing it on-site and such an approach would create more certainty regarding delivery and alternatives. Another approach could be the payment, by developers, of a fixed commuted sum, that is used to fund affordable housing provision within the district. Either of these approaches would ensure that affordable housing is provided within the district but on a more flexible basis that would allow the council to better respond to ever-changing need.

The policy does not differentiate between site types: greenfield, brownfield, inner city and edge of city sites. The land values associated with these site types vary and has implications for development costs of projects. Therefore, the policy could differentiate between site types by using a banding system such as that used by the City of York or Leeds (see page 9 &10) where the level of provision required is based on zones.

In addition, consideration should be given to discounting the amount of social housing provision required for residential schemes that utilises vacant/derelict buildings such as old mills and other buildings of architectural merit. This can be justified as the development costs of these types of schemes tend to be higher than new build projects on a 'shovel ready' site and not only would discounting the affordable housing requirement on such sites ease the burden on developers, it would also encourage sustainable development and regeneration of existing buildings across the district.

We would suggest that it would be cumbersome and time-consuming to put in place Section 76 planning agreements in order to secure an affordable housing element within a residential scheme. This would ultimately delay the delivery of the schemes as planning permission would be withheld until the legal agreement was in place and a developer would not be able to commence works until such times as the consent has been issued. Therefore, we would urge the council to remove any reference to the need for section 76 planning agreements. It would be more appropriate and efficient to deal with these matters through an appropriately worded planning condition.

We would respectfully suggest that Policy HOU 5 is revised to read as follows:

“Planning permission will be granted for residential development that provides affordable housing, where it can be demonstrated that there is need.”

Affordable housing should consist of social rented housing and/or intermediate housing. In determining the appropriate mix of affordable housing in terms of size, type and tenure, regard will be had to an up to date analysis of demand, including housing stress and prevailing housing need.

The affordable housing should be provided as an integral part of mixed tenure development, integrated with general needs housing and not readily distinguishable in terms of external design, materials and finishes.

Where it can be demonstrated that it is not sustainable or viable for a proposed development to meet the requirements of this policy in full, the council will consider suitable alternatives on a case-by-case basis, such as commuted sums.”

Examples of Affordable Housing Planning Policy in other UK cities – York, Leeds and Manchester

City of York

On page 115 of City of York’s Local Plan Draft Publication, Policy H10 – Affordable Housing is proposed as a planning policy to ensure appropriate provision of affordable housing in new residential schemes. The plan was been submitted to the Secretary of State for Housing, Communities and Local Government on Friday 25 May 2018 for independent examination.

The policy directs a differing level of provision based on the site type and units numbers as set out below:

Table 5.4: Affordable Housing Site Thresholds

Threshold	Target
Brownfield sites = > 15 dwellings	20%
Greenfield sites = > 15 dwellings	30%
Urban, Suburban and Rural sites 11-14 dwellings	20% ¹
Urban brownfield sites 5-10 dwellings ²	15% ¹
Urban greenfield sites 5-10 dwellings ²	19% ¹
Urban brownfield sites 2-4 dwellings ²	6% ¹
Urban greenfield sites 2-4 dwellings ²	10% ¹
Sub-urban brownfield sites 5-10 dwellings ²	10% ¹
Sub-urban greenfield sites 5-10 dwellings ²	15% ¹
Sub-urban brownfield sites 2-4 dwellings ²	2% ¹
Sub-urban greenfield sites 2-4 dwellings ²	7% ¹
Rural brownfield sites 5-10 dwellings ²	11% ¹
Rural brownfield sites 2-4 dwellings ² that	3% ¹
Rural greenfield sites 5-10 dwellings ²	17% ¹
Rural greenfield sites 2-4 dwellings ²	8% ¹
Notes to Table	
1	This is the target percentage to be used in the off-site financial contribution calculation following sub-clause (iii) below
2	For sites that have a maximum combined gross floorspace of more than 1,000sqm

Belfast City Council could introduce a similar banding that differentiates between the each site type where new housing is proposed.

Leeds Council

On page 79 of Leeds Core Strategy, Policy H5 sets out the council’s planning policy in relation to affordable housing (below). The policy sets targets and thresholds for affordable housing provision based on a number of broad zones across the council area. Belfast City Council could incorporate elements of this policy, which responds to and is reflective of the variation of land value based on geography of sites within the district.

POLICY H5: AFFORDABLE HOUSING

The Council will seek affordable housing either on-site, off-site or financial contributions from all developments of new dwellings. Housing developments above a certain threshold should include a proportion of affordable housing to be normally provided on the development site.

On-site provision

On site affordable housing will normally be expected at the targets specified for developments at or above the dwelling thresholds in the following zones:

Zone	Target	Threshold
1	35%	10
2	15%	15
3	5%	15
4	5%	15

Off-site provision for smaller schemes

For housing schemes below the on-site size thresholds in Zones 1 and 2, an offsite commuted sum will be sought tapered down proportionately from the equivalent cost of on-site provision at the lowest size threshold.

Affordability of affordable housing should be designed to meet the identified needs of households as follows;

- 40% affordable housing for households on lower quartile earnings
- 60% affordable housing for households on lower decile earnings

The affordable units should be a pro-rata mix in terms of sizes and types of the total housing provision, unless there are specific needs which indicate otherwise, and they should be suitably integrated throughout a development site.

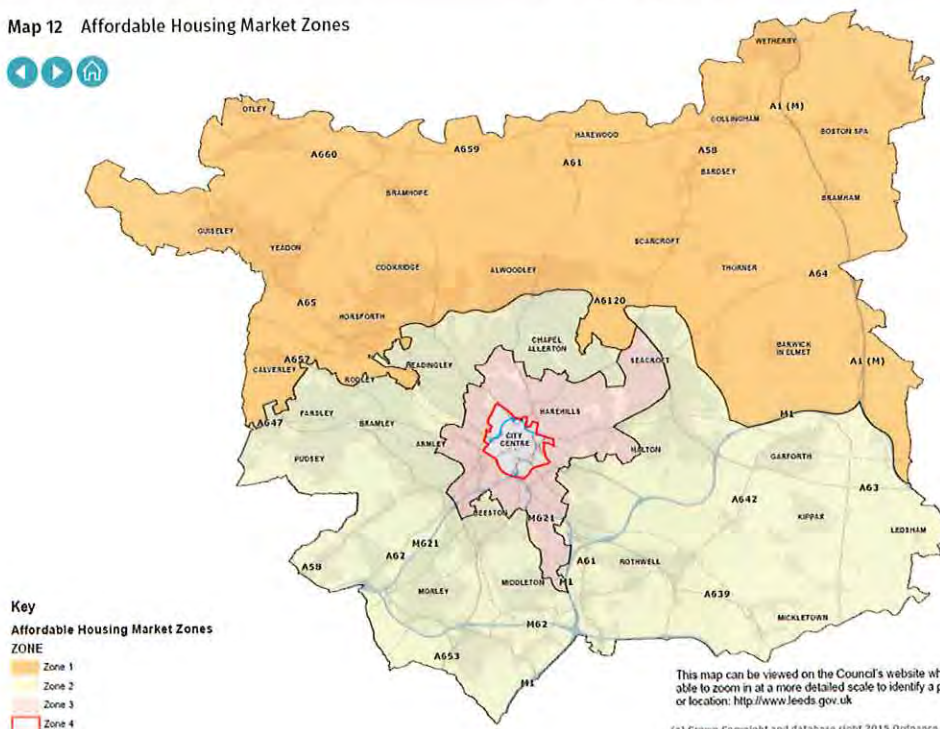
Applicants may choose to submit individual viability appraisals to verify that the affordable housing target cannot be met. In such cases, affordable housing provision may be reduced accordingly.

Affordable housing provision should be on site, unless off site provision or a financial contribution can be robustly justified.

Elderly persons sheltered housing and low cost market housing should not expect the requirement for affordable housing to be automatically waived or reduced, although individual viability appraisals will be taken into account.

Secure arrangements in the form of S106 agreements, must be agreed to ensure delivery and that affordability embodied within affordable housing is maintained for future people of Leeds in housing need.

Map 12 Affordable Housing Market Zones



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Manchester City Council

In Manchester's Core Strategy, p116, Policy H8 relates to Affordable Housing.

Within this policy, the threshold is set at sites of 0.3ha or greater or where a scheme proposes 15 units or greater that affordable housing provision (20%) will be expected.

It also states that an exemption from providing affordable housing or a lower proportion may be acceptable in some circumstances, such as where it would financially undermine significant development proposals critical to economic growth within the City.

This threshold in terms of unit numbers and site size is much less onerous and stringent than that proposed in Belfast City Council's Draft Plan Strategy. We would encourage the council to review and relax the thresholds for the requirement to provide affordable housing within new residential developments.

Soundness Test

- The policy is contrary to soundness test CE2 as it is not realistic or appropriate to require 20% for Affordable Housing on sites of 0.1ha or 5 no. units or more.
- It is also contrary to soundness test CE3 in that there is no suitable mechanism for implementation i.e. Section 76 Agreements are not suitable means to deliver the affordable housing provision within a scheme.
- Finally, the policy is contrary to soundness test CE4 in that it is not flexible and lacks alternatives such as the payment of a fixed commuted sum by developers.

Remedy

- The policy should be re-worded so that affordable housing provision is linked to demand/need. It should also be updated to allow for alternatives such as the payment of a fixed commuted sum by developers.

Policy HOU8 – Specialist Residential Accommodation

Policy HOU8 – Specialist residential accommodation

Planning permission will be granted for specialist residential accommodation, including retirement villages and care-related facilities, where the following criteria are met:

- a. The homes and/or bed spaces to be provided meet community needs demonstrated through a statement of specialist housing need; and
- b. The proposals will deliver convenient access to relevant local services and facilities, including local shops, public transport routes and health facilities.

Proposals for the improvement of existing specialist accommodation, including sheltered housing, extra care housing, nursing homes and residential care homes shall also be supported where these criteria are met. This will be subject to meeting all other policy requirements.

We **support** this policy. As a population we continue to live for longer and consequently there will be a growing need to provide supported housing including retirement villages and care-related facilities throughout the plan period. We would suggest however that the planning history of a site is also included within the criteria listed.

In 2014, an application (Y/2014/0015/O) was submitted for a mixed use scheme on the site encompassing the following uses: medical centre, nursing home, spa/leisure, sports and recreation facilities with associated ancillary accommodation, restaurants / retail units and associated living accommodation.

Within chapter 5 of the supporting statement submitted alongside the planning application a need for this type of facility was robustly demonstrated (see Appendix 4).

In summary the supporting statement recognised Northern Ireland as having the fastest growing group of older people in the United Kingdom and therefore placed an ever-growing emphasis on the need to provide adequate care arrangements for NI's ageing population. It also highlighted that it is projected that the number of people in the province aged 65 and over will have increased by 44% from 2012 to 2027.

With an expected reduction in the number of statutory NHS care homes across NI due to planned closures, there is clearly a need to fill this gap with alternative living accommodation for the elderly.

An Ipsos MORI survey was undertaken as part of the submission which clearly demonstrated that people having the choice to live independently in the comfort of having on-site medical facilities available were important elements of the development proposal. The survey also indicated that they will not move far from their current location. With Castlereagh having the third highest mean age of NI population, and limited options currently available, the subject site at the edge of the Castlereagh settlement was seen as an ideal location to accommodate the need for such a unique facility.

In addition, a number of letters of support for the proposal were received from a local GP practice, the Chief Executive of the South Eastern Health and Social Care Trust and the Health Minister at the time, Edwin Poots. These letters further reinforced the need for the facility at this locality.

The subject lands are suitably located to provide convenient access to local shops, public transport routes and health facilities.

It is pleasing to note that on page 79, para 7.1.56 of the DPS, the council recognise that specialist residential accommodation does not meet the needs of the general population and will therefore will be exempt from affordable housing obligations.

Policy HC1 – Promoting Healthy Communities**Policy HC1 – Promoting healthy communities**

The council will seek to ensure that all new developments maximise opportunities to promote healthy and active lifestyles. New developments should be designed, constructed and managed in ways that improve health and promote healthy lifestyles. This will include supporting active travel options, improving accessibility to local service centres, reducing the use of private car travel, adequate provision of public open space, leisure and recreation facilities, high quality design and promoting balanced communities and sustainable neighbourhoods.

Planning permission will be granted for proposals that help to sustain and improve neighbourhoods in all parts of the city.

Health and wellbeing is an important consideration during the development management process and significant development proposals will require to demonstrate how they contribute towards promoting healthy communities. The council will require the submission of a HIA¹⁴ as part of major residential, commercial and industrial developments or other proposals with potential to have a significant adverse effect on public health and wellbeing.

The council may seek to secure health and wellbeing improvement measures by way of s76 planning agreement. This may be by way of agreed works carried out by the developer or a financial contribution from the developer in lieu of such provision.

We **support** this policy. Planning has the potential to promote healthy and active lifestyles by providing policy which encourages and supports new developments that incorporate active travel options and reduce the reliance on the private car. This policy is permissive of proposals that help to sustain and improve neighbourhoods and is therefore particularly relevant in the case of the subject lands where the development of the site would satisfy a need for housing within the east of the city.

We would however suggest that it would be cumbersome and time-consuming to seek Section 76 planning agreements in order to secure health and well-being improvements linked to developments. This would ultimately delay the delivery of the schemes as planning permission would be withheld until the legal agreement was in place and a developer would not be able to commence works until such times as consent has been granted. Therefore, we would urge the council to remove the final paragraph of this policy removing the need for section 76 planning agreements and instead deal with this issue via an appropriately worded planning condition.

Policy CI1 – Community Infrastructure**Policy CI1 – Community infrastructure**

The council will seek to protect and provide development opportunities for community, health, leisure, nurseries and educational facilities based on local need in line with the projected population growth over the plan period.

Planning permission will be granted for the provision of new and improved community infrastructure at appropriate and accessible locations within the urban area, subject to consideration of the nature and location of any proposals. All proposals shall ensure that there is no unacceptable impact on residential amenity or natural/built heritage and satisfactory arrangements are provided for access for all, including for pedestrians, cyclists and public transport. Where proposals affect lands specifically zoned for development for particular uses, such proposals will only be considered where they do not prejudice the proper planning and sustainable development of the zoned lands.

In exceptional circumstances where there is no suitable land available in a designated village settlement boundary, favourable consideration may be given to a community use associated with the settlement which is located next to the settlement limits.

There is a presumption against the development of existing community infrastructure or lands identified for such use for alternative uses. Proposals for alternative uses will require to demonstrate that the existing facility/designated site is no longer required and that alternative arrangements are in place to ensure no significant diminution of community infrastructure provision.

Where appropriate, new developments should be required to provide or contribute towards any new community infrastructure requirements arising as a result of development and should ensure good accessibility to existing services and facilities intended to serve future residents. The council may seek to secure the provision or improvement of community facilities, or improved access to such facilities, by way of s76 planning agreement. This may be by way of agreed works carried out by the developer or a financial contribution from the developer in lieu of such works.

We are **supportive** of this policy. The policy contributes to the council's aim of improving the health and well-being of the citizens living within the city by ensuring that adequate provision is made for community infrastructure facilities placed at highly accessible locations. The subject lands are one such location.

As previously stated in relation to Policy HOU5 & Policy HC1, we do not believe that Section 76 Agreements are suitable in this instance and that appropriately worded planning conditions would be a much more efficient method of securing the associated benefits of a scheme. Therefore, we would urge the council to remove this element of the policy.

Proposed Site for Inclusion within the Settlement Limits of Belfast

Based on the ambitious economic and associated housing growth plans in the DPS and considering the lack of sufficient previously developed and undeveloped land within the existing settlement limit in Belfast; we would urge the Council to consider the expansion of the settlement limits in appropriate and sustainable locations to accommodate new residential development that is required to meet the projected housing need.

On this basis, we draw your attention to our client Kilmona Holdings Ltd. lands located along the Ballygowan Road (see appendix 1). The lands directly abut the existing settlement limit on the Ballygowan Road along the eastern boundary and the settlement limit on Church Road to the western boundary. Lands to the south of the site are in pasture, whilst the land to the northern boundary presents an unkempt buffer of rough steeply sloping ground adjacent to residential development at Grey Castle Manor. The site is well-enclosed by existing mature vegetation and lies comfortably into adjoining development.

These lands are particularly well suited to accommodate expansion of the current settlement limit in line with its increased housing growth for the following reasons:

- The subject land is a logical extension of the existing development limit, as it does not impact on the landscape setting of the city
- Parts of the northern boundary of the site directly adjoin the existing settlement limit.
- The site is well-located, as it lies into the zoned existing residential areas of MCH 04/07 (see appendix 2 & 3) and is close to the main concentration of residential lands to the south of the settlement
- The site is well served by public transport along the Ballygowan Road
- Lands fall towards existing built form of Belfast and this topography serves to shield the site from all views to the south and west of the city
- There are no environmental constraints that could impact on future development

It is clear from the points set out above that the attached lands are appropriately located to accommodate projected housing growth. We would therefore respectfully request that their inclusion within the settlement limit is considered during the forthcoming stages of Local Development Plan preparation.

We look forward to receiving an acknowledgement of receipt of this submission and engaging further with the Council as the LDP progresses.

Yours Sincerely

Ballygowan Road, Castlereagh

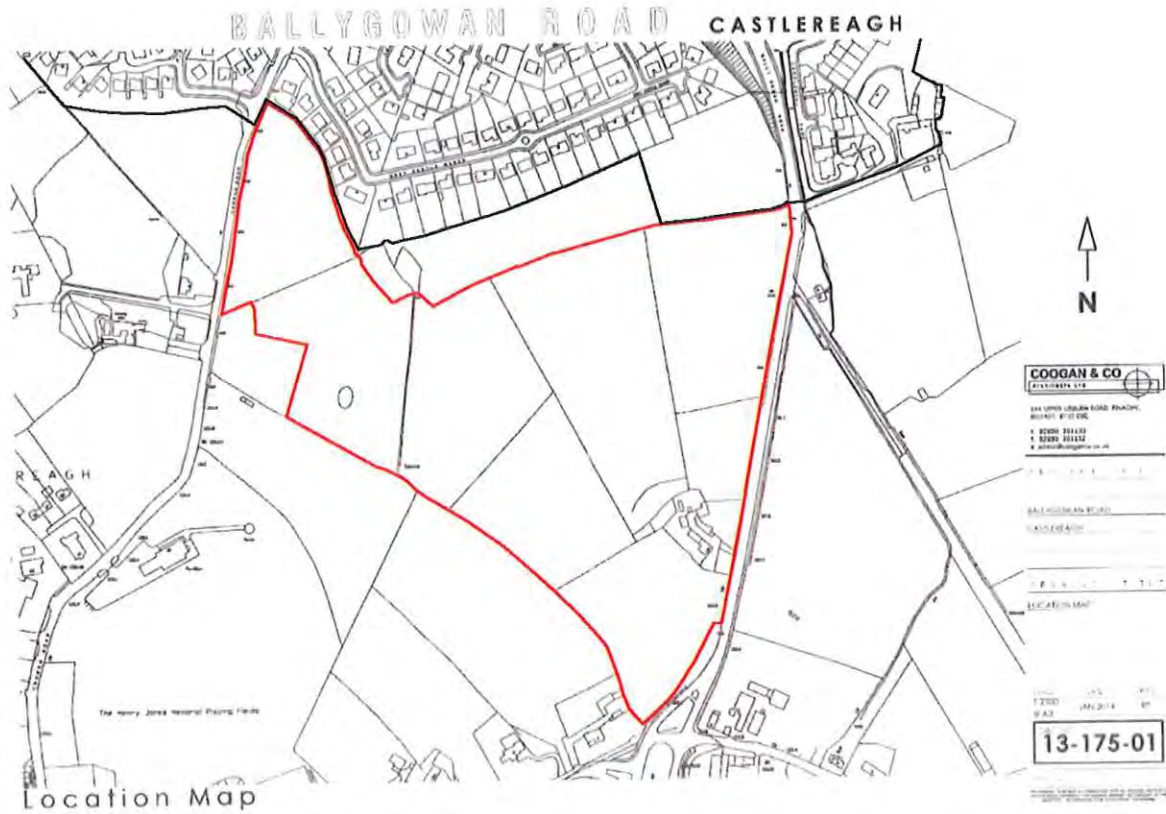


Stuart Clarke

Gravis Planning

Appendix 1

Subject Lands at Ballygowan Road (N.T.S.)

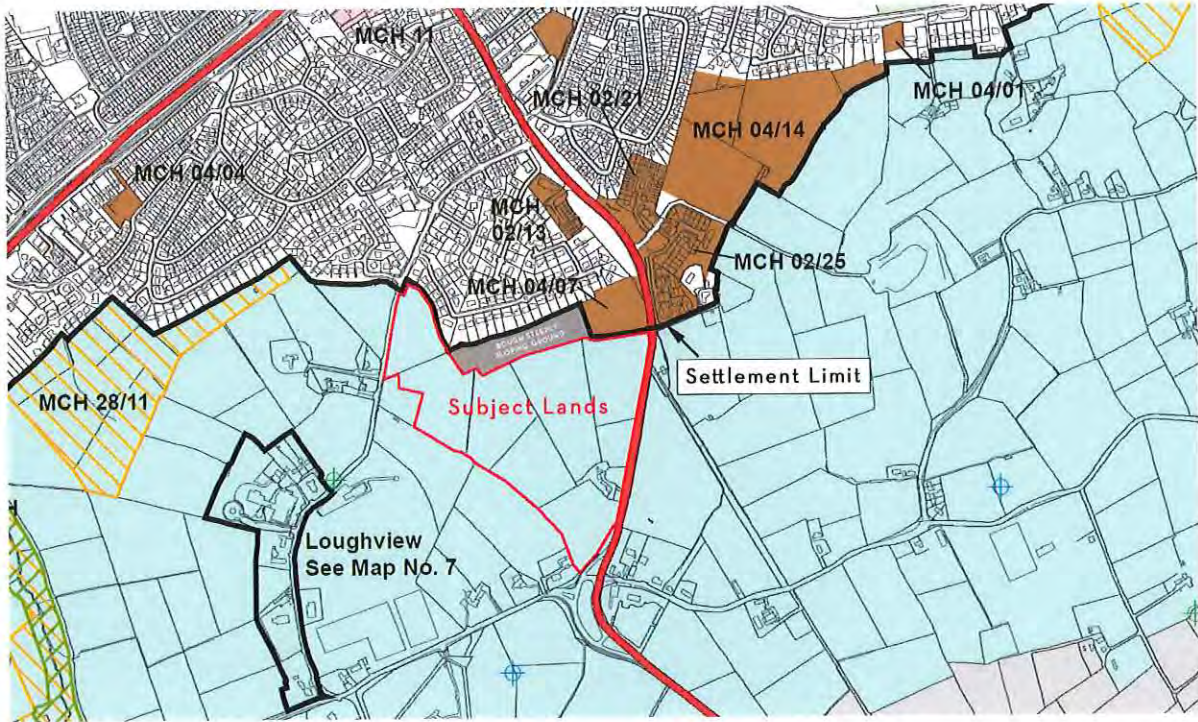


Appendix 2

Aerial of site



Subject Lands relative to edge of settlement limit and existing housing zoning MCH 04/07 - BMAP
2015



Appendix 4

Statement in Support of Planning Application

Y/2014/0015/O

*Medical Centre, Nursing Home, Spa/Leisure, Sports
and Recreation Facilities with associated ancillary
Accommodation, Restaurants/Retail Units and
Assisted Living Accommodation
at Ballygowan Road, Castlereagh*

September 2014

**STATEMENT IN SUPPORT OF PLANNING
APPLICATION**

***Medical Centre, Nursing Home, Spa/Leisure,
Sports and Recreation Facilities with associated
ancillary Accommodation, Restaurants/Retail
Units and Assisted Living Accommodation at
Ballygowan Road, Castlereagh***

Planning Ref. Y/2014/0015/O

September 2014



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2	Site Description & Development Proposal
3	Area Plan Context
4	Planning Policy
5	Need for the Facility
6	Other Material Considerations
7	Summary & Conclusions

ANNEXES:

Annex 1: Subject Site

Annex 2: Manor Healthcare Letter

Annex 3: Support Letters

Annex 4: List of the Amenities

Annex 5: Population Figures

Annex 6: The Detail Article 12th June 2014

Annex 7: Ipsos MORI Survey

1 Introduction

- 1.1 This planning statement is submitted in support of a pending outline planning application (Y/2014/0015/O) for Meadow Park Care Village on a greenfield site adjacent to Castlereagh settlement limit. The location of the site is shown in the enclosed plan (**ANNEX 1**).
- 1.2 This Care Village specialises in assisted living and supporting people comprising of an extensive range of community facilities (medical, health, leisure and social) to serve the future residents of the 210 assisted living accommodation units.
- 1.3 Manor Healthcare Ltd - a family owned Northern Ireland based company - will be the future operator of Meadow Park (**ANNEX 2**). The business has been involved in the care of the frail elderly since 2007 and contributes significantly to the private healthcare sector currently employing a total of circa. 200 staff. Manor Healthcare underpins the following core values:
- Residents right to privacy, choice, respect, dignity and confidentiality will be respected and promoted.
 - The treatment of each resident as an individual taking into account their physical, emotional and spiritual needs.
 - The delivery of care in a competent, professional and courteous manner.
 - The caring and supportive role of relatives and friends will be fully acknowledged and valued and their active participation in determining the quality of care will be sought.
- 1.4 This well-established company clearly has the capacity and ability to provide the full range of services at the Care Village. A private firm will manage the on-site security.
- 1.5 Extensive consultation has been undertaken with key stakeholders ranging from the Minister of Health, Southern Eastern Health Trust and a local General Practitioner (GP), who are fully supportive of this desired project (**ANNEX 3**).
- 1.6 This planning statement sets out the overall case for the proposal in the following sections:-
- **Section 2** provides an overview of the site and surrounding area and describes the proposed development.
 - **Section 3** considers the area plan context.
 - **Section 4** examines the planning policy context.
 - **Section 5** provides evidence on the need for a Care Village at a regional and local level, including a review of alternative sites.
 - **Section 8** sets out any other material considerations.
 - **Section 9** contains the summary and conclusions.

2 Site Description & Development Proposal

Site Description

- 2.1 This 12.21 ha application site lies within the countryside south of Castlereagh settlement limit, sandwiched between Church Road on the western side and Ballygowan Road on the eastern boundary. The northern boundary adjoins an unkempt strip of rough steeply sloping ground adjacent to residential development at Grey Castle Manor that falls within the development limit. The site comprises of agricultural fields delineated by traditional hedgerows and sporadic groups of trees.



Development Proposal

- 2.1 This development proposal will bring together a diverse community of like-minded people sharing interests and leisure activities with as much or as little social interaction as each individual prefers. In a carefully designed neighbourhood village park setting, this scheme comprises of the following:
- an extensive range of leisure and social facilities;
 - care and support when needed from an on-site care centre and village medical centre; and
 - approximately 210 retirement dwellings.
 -
- 2.2 The village will have its own unique leisure opportunities with on-site facilities such as an indoor swimming pool, spa/health club, tennis courts, bowling green, putting green, shops, and medical centre with GP surgery, physiotherapy and dental services. A restaurant/coffee lounge will be provided in addition to function rooms for dance, arts and crafts and a multi-purpose sports hall. A comprehensive list of the amenities provided in the village centre and the care/well-being centre are enclosed in **ANNEX 4**.
- 2.3 Vital components of the project are the on-site community, leisure and 24 hour medical facilities to provide older people with independent living and instant access to support. Each of the residential homes will have access to top of the range electronic assistive technology devices. These assistive technology products will help people who lack full mobility to open doors, answer telephones and intercoms, and operate a host of electronic devices from lamps and televisions to motorised chairs and beds. This will ensure independence, freedom and peace of mind for the Meadow Park residents.
- 2.4 Visitors, staff and residents travelling by vehicle will enter and exit the village from one access point proposed off Ballygowan Road. On site security and optional levels of assistance will be available as part of the agreed package (bronze, silver and gold) ranging from assisted living when required through to 24 hour domiciliary care. Optional support services, laundry services, personal shopping, domestic cleaning, personal care and meal delivery services will also be offered. A landscape management company will be appointed to maintain external landscaping and repairs, which would be included in monthly service and maintenance charges. A small portion of the apartments will also be set aside for visiting relatives.

Scale of the Project & Phased Construction Programme

- 2.5 The scale of the living accommodation will facilitate the extensive range of on-site medical and social/recreational facilities. The site will be constructed in the following phases:

Phase 1	2015	Care home+ 30 fitted rooms, Village Centre Completed, Restaurant Completed, Wellness Spa (25%), 20% of Dwellings
---------	------	--

Phase 2	2016	Additional 30 rooms in care home, Wellness Spa (75%), Multi-purpose sports hall (25%), Apartments (2 Blocks), Dwellings (20%),
Phase 3	2017	Additional 30 rooms, multi-purpose sports hall (75%), Apartments (2 Blocks), Dwellings (20%)
Phase 4	2018	Apartments (2 Blocks), Dwellings (20%)
Phase 5	2019	Dwellings (20%)

Class C3: Residential Institutions

- 2.6 The applicant is seeking permission for Class C3: Residential Institutions of the Planning (Use Classes) Order (N.I) 2004, which is defined as the provision of residential accommodation and care to people in need of care. In order to fall within this category, the tests are the provision of both 'accommodation' and 'care'. 'Care' means personal care as defined in the Registered Homes (NI) Order 1992(c) and in Class C3(a) also includes the personal care of children and medical care and treatment. The Registered Homes (NI) Order describes care to include the provision of appropriate assistance in counteracting or alleviating the effects of old age and infirmity; disablement; past or present mental disorder including action taken to promote rehabilitation; assistance with physical or social needs; and counselling.
- 2.7 Whilst it is recognised that the Department can often be concerned that the type of accommodation has the appearance of 'housing' – self-contained units, the major difference in this project is that it comprises of a single planning unit with the central focus of the overall development being the significant provision and delivery of care to meet the individual resident's needs. Supported by the tests applied in many GB appeal cases and judicial reviews¹, Meadow Park Care Village plainly falls within Class C3: Residential Institutions.

¹ High Court Judgement of *West Oxfordshire District v Secretary of State and Wates Built Homes Ltd (1990)*

3 Area Plan Context

- 3.1 In accordance with Article 25 of the Planning (Northern Ireland) Order 1991, the Department will have regard to the relevant development plans, which are the extant Belfast Urban Area Plan 2001 (BUAP) and the Draft Belfast Metropolitan Area Plan 2015 (BMAP).

Belfast Urban Area Plan 2001 (BUAP)

- 3.2 Whilst the BUAP has passed its notional end date, this plan remains a material consideration. The application site lies outside the Castlereagh Settlement Limit and is designated within the Green Belt. The site falls within the Area of High Scenic Value (AOHSV) designated in the extant plan.

Draft Belfast Metropolitan Area Plan 2015 (BMAP)

- 3.3 Whilst the BMAP Public Inquiry has completed, BMAP remains in draft form. Akin to the BUAP, the subject site is situated in the countryside within close proximity to Castlereagh Settlement limit. The site also lies within the Castlereagh Escarpment AOHSV therefore Policy COU7 is applicable. This policy states that “*planning permission will not be granted to development proposals that would adversely affect the quality, character and features of interest in the AOHSV.*”

BMAP Objections

- 3.4 During the Public Inquiry, objections were made seeking inclusion of the lands within the development limit. In their report, the Planning Appeals Commission (PAC) recommended the non-inclusion of these lands within the Castlereagh settlement limit. It is therefore anticipated that should BMAP be adopted, the subject site will be excluded from the development limit.
- 3.5 Although the Commission recommended no change to the extent of Castlereagh Escarpment AOHSV, the PAC has suggested the rewording and expansion of Policy COU7 to provide tailored policy for AOHSVs. In particular, the Commission has proposed the replacement of the words “*adversely affect*” in the first paragraph of COU7 with “*have a significant adverse effect on*” (*Our emphasis*). The planning documentation accompanying the planning application plainly demonstrates that the design and layout of the proposed scheme will not result in any significant adverse effect on the quality, character and features of the AOHSV.

Prematurity

- 3.6 As the Inquiry is complete and this pending planning application can be assessed against relevant rural planning policy, it is considered that the development proposal will neither prejudice the outcome of the plan process nor prejudice the emerging adopted plan to retain general conformity with the Regional Development Strategy

2035. This development proposal should be determined under rural regional planning policy as discussed in the next Section.

4 Planning Policy

- 4.1 Section 5 assesses the proposed development against the key policy documents - Planning Policy Statement 1 (PPS1) '*General Principles*' and Planning Policy Statement 21 (PPS21) '*Sustainable Development in the Countryside*'.
- 4.2 Paragraph 59 of PPS1 outlines that the Department's guiding principle in determining planning applications is that development should be permitted unless the proposed development will cause demonstrable harm to interests of acknowledged importance. This supporting statement and the accompanying documentation submitted with the planning application prove how this development proposal does not cause demonstrable harm, and should therefore be approved.
- 4.3 Policy CTY1 of PPS21 is generally permissive of projects where there are "*overriding reasons why that (1) development is essential and (2) could not be located in a settlement*". There is an obvious need for this project that cannot be facilitated within Castlereagh settlement. The forthcoming sections demonstrate how Meadow Park complies with the two tests in PPS21.

5. Need for the Facility

Regional Level

Ageing Population

- 5.1 Northern Ireland (NI) has the fastest growing group of older people in the United Kingdom (UK), which is placing an ever-growing emphasis on the need to provide adequate care arrangements for NI's ageing population. According to the NI Statistics and Research Agency (**ANNEX 5**), the population is projected to increase to 1.918 million in 2022 from 1.824 million in 2012, an average annual rate of growth of 0.5%. Whilst the NI population aged under 65 is projected to increase by 1.5% (24,000 people) from 2012 to 2022, the population aged 65 or more will increase by a staggering 26% (71,000 people). The number of people in the province aged 65 and over is projected to rise by 44% in the next fifteen years (2012-2027).
- 5.2 Within this group, the numbers of the most frailest have seen the greatest proportionate increase over the last decade – in 2001 there were 23,300 people aged 85 or more, this has now increased to 31,400 (an increase of 35% over the decade).

Rise in Dementia Sufferers

- 5.3 An ageing population in the province is leading to a parallel rise in the number of people diagnosed with dementia from the current estimate of 19,000 to 23,000 by 2017 and around 60,000 by 2051² resulting in a tripling of dementia sufferers over the next 30-40 years.

Transforming Your Care

- 5.4 Due to growing pressures on the Northern Ireland (NI) Health and Social Care system enhanced by the ever-increasing ageing population and expected rise in dementia sufferers, the Minister for Health, Social Services and Public Safety, Mr Edwin Poots MLA, announced in June 2011 a review of the provision of health and social care services in Northern Ireland. A Review Team of independent experts brought forward recommendations for the future shape of services.
- 5.5 A Report of the Review was published - '*Transforming Your Care*' (TYC), which sets out key changes for health and social services over the next five years. The key principle in TYC is that '*home should be the hub of care*', therefore a greater provision of services for older people is needed at home and in the community.
- 5.6 In October 2012, the Minister launched '*Transforming Your Care: Vision to Action*' setting out proposals for key service changes. A consultation process was undertaken and the Post Consultation Report was published in March 2013. The consultation process found that '*providing care to closer to home for older people was very well*

² Improving Dementia Services in NI: A Regional Strategy, November 2011

received and 73% of respondents agreed with the proposals. Respondents felt it important to help support older people to live as independently as possible for as long as possible where it is safe and appropriate to do so." Concerns were raised about the closure of statutory residential homes. The *Vision to Action* document proposes that investment in alternatives, which is enabled by closure of some statutory residential homes, is the most appropriate way forward.

Reduction in the Provision of Residential/Nursing Homes

- 5.7 In a Statement to the Assembly on 19th March 2013, the Minister proposed to **reduce the number of statutory residential homes by around 50% over the next three to five years**. He outlined that "...the planned reduction in the number of residential homes does signal our commitment to thinking outside of an institution led approach to health and social care provision, and to considering **new opportunities for ensuring that care provision is service user led and committed to supporting our citizens to be able to stay at home where possible**." The provision of long-term residential places will significantly reduce to be replaced with 'homecare' or 'new models such as respite care'.
- 5.8 As the Health Trusts commenced the closure of residential care homes, a public outcry followed and a fresh consultation on the matter was announced in August 2013 and the Health Minister intervened, withdrawing the trusts' power to make decisions on shutting down their statutory residential care homes. The Health and Social Care Board stepped in to undertake a consultation that was completed recently. The Board recommended that the health trusts review their policy on permanent admissions – meaning each health trust could keep at least one home open or they could still insist that all homes in their area close.
- 5.9 Nonetheless, presently only 4 of the 18 NHS residential homes earmarked for closure are taking permanent admissions with the South Eastern Health and Social Care Trust accepting no admissions (**ANNEX 6**).
- 5.10 In a PricewaterhouseCoopers report titled '*Social Care in Northern Ireland*' prepared on behalf of Independent Health and Care Providers, it was found that during 2005/06 – 2009/10, there has been a downward trend in the total number of residential homes and bed spaces (especially on the statutory side). It is therefore clear that the reduction in care homes has been taking place for a while. Whilst the closure of the existing 18 statutory residential homes may not happen overnight, the Department of Health's policy aim to shift care from institutional settings to home and community settings remains, and alternatives are required to encourage such a transition.
- 5.11 The operator, Manor Healthcare, recognises how "*the development will assist with fulfilling a growing need to provide both specialist nursing care and meet the Department of Health Strategy of giving individuals care in their own home (i.e. "own door home for life")*". This type of home-care is a fundamental strand of the Department's *Transforming Your Care (TYC) policy*."

An Alternative – Retirement Care Village

- 5.12 In general, the options available to older people are:
- (a) Remain at own home (with or without support);
 - (b) Local authority sheltered accommodation;
 - (c) Retirement parks; or
 - (d) Private Residential/Nursing Care Homes.
- 5.13 Over 70% of pensioners in Northern Ireland are home-owners who are not generally eligible for sheltered accommodation (Option B) or government paid institutional care (Option D). Private care homes are not widely affordable (averaging £600 per week), NHS care homes are not taking in new admissions (Option D) and retirement parks are not broadly available in the province. The current options do not necessarily suit everyone; an alternative choice is therefore necessary.
- 5.14 Evidence has shown that retirement assisted living villages are increasingly the preferred option to the ageing population as it allows individuals to stay on one site – catering for both the independent to the very frail elderly. In June 2008, the NI Housing Executive commissioned research³ that analysed the need and demand for retirement villages in their various forms. The survey work demonstrated that people in NI are interested in a retirement village as a housing option. The 2008 study also found that retirement villages are in their infancy in the UK and Republic of Ireland, but have been increasing in popularity due to drivers including the ageing population, the concept of ageing in place, development of new lifestyles in older age and recognition of the need for a wider range of housing options for older people.
- 5.15 The halting of new admissions into NHS care homes, a fast growing ageing population paralleled by the growth in dementia sufferers, are all placing a pressing need on alternative solutions to be taken forward to accommodate the ageing population. In November 2011, PriceWaterHouse Coopers identified dedicated Healthcare Villages as one of the best practical solutions to caring for an increasing population. Endorsed by the Chief Executive of the South Eastern Health and Social Care Trust, the Meadow Park project will obviously help accommodate the growing need (**ANNEX 3**).
- 5.16 Meadow Park Care Village presents a homecare model with the promotion of assisted living that encourages independent living for the elderly to enable them to enjoy life to the full, while day-to-day chores are being cared for by Manor Healthcare. Some residents will rely on varying degrees of domiciliary care; they will also have their own front door, living room, kitchen, bedroom and bathroom facilities.
- 5.17 In accordance with Transforming Your Care, Meadow Park *'home-from-home'* is an innovative solution in assisting with the pressing need to provide assisted living accommodation for NI's increasingly ageing population.

³ Analysis of the Need and Demand for Retirement Villages in Northern Ireland, conducted by Fiona Boyles Associates for Northern Ireland Housing Executive, June 2008

Local Level

- 5.18 Castlereagh presently has around 67,000 residents with 69,000 projected in 2023⁴. A high number of those residents are aged 65 and over (12,107) which is predicted to rise to 13,635 in 2023. The 2011 Census identifies Castlereagh District with the third highest mean age of NI population at 40.06⁵. In addition, Belfast has the highest number of people in its district over 65 (41,000), which is expected to increase to 45,000 over the next decade. The future operator recognises Castlereagh and the South and South-East Belfast as an affluent part of Northern Ireland, which suits this type of assisted living facility. Castlereagh is therefore an ideal location for this development proposal.

Ipsos MORI Survey

- 5.19 Ipsos MORI undertook a survey of residents in Castlereagh, Carryduff, Comber and the surrounding area to assess potential interest in and demand for a proposed Care Village on the outskirts of Castlereagh. The survey (**ANNEX 7**) found that 81% of over 55s say it is important that they live close, that is, within 10 miles to friends and family, for 57% this is regarded as 'very' important. 40-54s reinforce this point further, with 82% claiming it would be important to their parents that they live close to family and friends. Ipsos MORI also found that staying within the local area is clearly important to many over 55s, not just because of family and friends, but also for hobbies and socialisation.
- 5.20 63% of both 40-54s and over 55s found the concept of a retirement village appealing, with almost a third of both audiences finding it very appealing (30% of 40-54s and 29% of over 55s). In terms of Meadow Park, one in five over 55s considered access to medical care within the development as appealing, while 14% cited the security that the village would offer as beneficial. One in ten spoke of the benefits of having facilities close by, while 7% liked the fact that the village may provide the opportunity to meet friends and have a social life. The location of the development and its proximity to where they currently live is also a benefit for two in five (38%). Interestingly, living independently is a key factor for the interviewees with 89% of over 55s considering it important that the development proposal offers supported living with 56% claiming it is 'very' important. **A quarter (25%) of over 55s would be likely to move to Meadow Park, a third of which would be willing to move there within the next five years.** An additional 18% would think about moving to the development within the next 10 years. Furthermore, the average distance that those likely to sell up and move to Meadow Park is 10 miles.
- 5.21 The Ipsos MORI survey clearly demonstrates that people having the choice to live independently in the comfort of having on-site medical facilities available are important elements of the development proposal. It is also clear that they will not move far from

⁴ The latest sub-NI population projections are based on the 2008 population. The 2012-based population projections for areas within Northern Ireland are planned for publication in Summer 2014

⁵ 2011 Census

their current location. With Castlereagh having the third highest mean age of NI population, and limited options currently available, siting Meadow Park at the edge of the Castlereagh settlement is an ideal location to accommodate the need for such a unique facility.

Meadow Park

- 5.22 Lying on the edge of Castlereagh settlement, Meadow Park has locational benefits for any future residents as they can enjoy a quiet rural setting whilst remaining within close proximity to their local community. Comparable assisted living models are pepper potted across Great Britain and are often found located on the fringes of a settlement to enable residents to enjoy both a rural setting and the nearby urban locality, for example:

Elmbridge Village, Surrey

- 5.23 Elmbridge Village, on the fringes of Cranleigh in Surrey, was the first privately-owned retirement community in the country. Developed in 1981, this model replicates the United States model. Similar in scale to Meadow park, Elmbridge village consists of 236 bungalows and apartments designed for senior living, set in 28 acres of grounds. Its rural setting provides acres of tended parkland, croquet lawn, a village pond and allotments. Akin to Meadow Park, a range of facilities are on-site including a restaurant, medical suite, village store and a 24 hour emergency service, providing cover for medical emergencies.

Rydon Village, Holsworthy

- 5.24 Set in a rural landscape, Rydon Village sits on the outskirts of Holsworthy and provides a secure and quiet retirement location for the over 55s with plenty of green spaces and a lake to create a carefully landscaped scheme. Similar to Meadow Park, Rydon Village has on-site security and provides a range of services from a central focal point. Catering facilities and gardening/maintenance services are provided from the Clubhouse. Hairdressing and fitness/treatment rooms are also available within the village. Similar facilities are offered at Meadow Park.

Sandford Station, North Somerset

- 5.25 St Monica Trust has recently developed Sandford Station, which is situated in the North Somerset countryside to provide a tranquil peaceful environment. Akin to Meadow Park, a range of healthcare facilities are available within the development including retirement homes for independent living with care and support available, nursing care home and specialist dementia care home. In addition, a wide array of facilities is provided – parallel to Meadow Park - restaurant, indoor and outdoor bowling, gym, pool, croquet lawn, physiotherapy, hairdresser, programme of events and activities.

- 5.25 It is evident from the above case studies that retirement assisted living villages on mainland UK are commonly found on the edge of settlements within the sprawling rural

countryside. Meadow Park is plainly following a well-established model that originally evolved in the USA and is common in UK mainland.

Alternative Site Assessment

- 5.26 An Alternative Site Assessment has been undertaken for the study area shown in Figure 1. A drive by site visit and desktop exercise were carried out to establish any unused sites of a suitable size to accommodate the development proposal. The desktop exercise involved an online search of sites for sale on agent's websites in addition to approaching key valuation agents. One site although falling short of the required size was identified as available on the market. In addition, the suitability and availability of zonings of an adequate size in Draft BMAP have been considered.

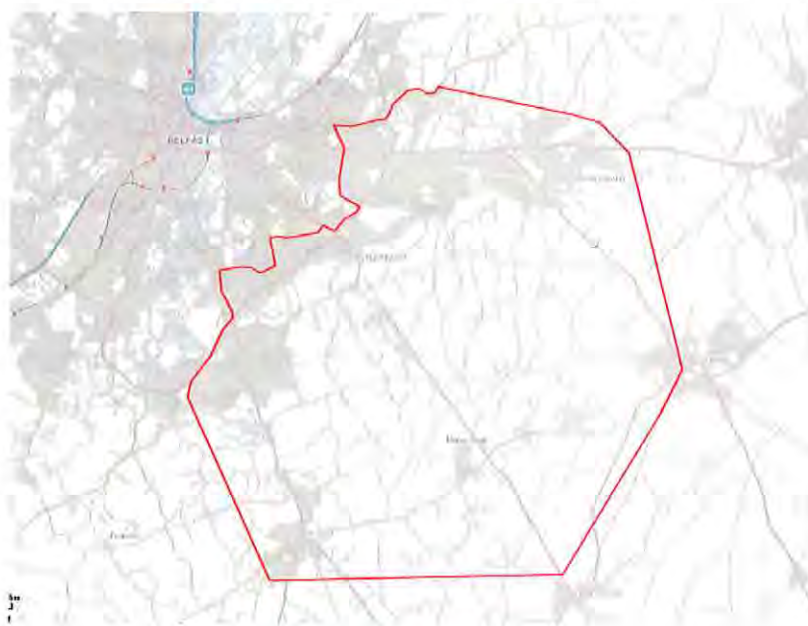


Fig. 1: Catchment Area

- ***Knockbracken Healthcare Park, Saintfield Road, Purdysburn***
 This site lies within the proposed settlement limit for Castlereagh; the majority of which is occupied by Belfast Health and Social Care Trust and voluntary organisations who work in the healthcare field. There are no apparent plans for the Trust to vacate this site in the foreseeable future; these lands are therefore not available for the proposed use. Only small piecemeal portions of land remain unused in the employment/industrial zoning (MCH07), which would not be of a sufficient size to accommodate the development proposal. Accordingly, the site is also not suitable for the development proposed.
- ***Lands at Cairnshill, Saintfield Road / Knockbracken Road***
 A considerable portion of this housing zoning (MCH 03/11) has been built out, that is, Brooke Hall Heights. Most of the residual undeveloped portions of the zoning are covered by live housing permissions or pending applications. These lands are neither for sale on the open market nor did any of the valuation agents disclose this site as available on the closed market. These lands are therefore not available. In any case, this site has been allocated in Draft BMAP solely for housing to provide for a maximum of 550 dwellings. Developing this site for a Class C3 Use would result in the loss of land for the provision of housing (Class C1) that has been accounted for in the housing allocation figures and accepted by

the Planning Appeals Commission as appropriate for housing. These lands are therefore unsuitable for a Class C3 project.

- **Land at Upper Newtownards Road, Carrowreagh Road**
This site is partly committed developed lands occupied by industrial/commercial units whilst the northern portion is currently unused land zoned (MCH 09) in Draft BMAP for light industrial, general industrial or storage and distribution uses. Further to the BMAP Public Inquiry, the Commission also recommended the zoning to include Class B1: Business Use (b) and (c). This site is therefore not suitable or available for the proposed C3 use as this would involve the loss of a potential business or industrial site which is resisted by Policy PED7 of PPS4. These lands are also not available.
- **Lands at Millmount, Quarry Corner and Carrowreagh Road**
These lands benefit from planning permissions for housing in accordance with the residential zoning (MCH 03/12). Housing has been completed on part of the zoning at Old Mill Heights. Introducing Class C3 Use on this site would distort the housing allocation figures as lands allocated for residential development would be lost. This site is therefore unsuitable for a Class C3 use. Furthermore, a proposed Park and Ride hub for the EWAY rapid transit scheme cuts through this zoning making it too noisy for the Meadow Park residents who require a peaceful and tranquil environment. Also, the plot is not currently for sale on the open market hence it is unavailable.
- **Land at Stoney Road, Dundonald**
This undeveloped site has no zoning in the BUAP whereas it is zoned for housing (MCH05/09) in Draft BMAP. The Commission has recommended in their report that this housing zoning be deleted from the Plan and the land excluded from the development limit whilst remitting to the Department that consideration be given to the inclusion of these lands within the Area of High Scenic Value (AOHSV). The Commission has taken the view that the emphasis on protection of the setting of the City must take priority. The deletion of this zoning results in an estimated loss of 175 dwellings, which would have to be provided elsewhere in order to meet the Housing Growth Indicators. With this in mind, it is vital that the housing zonings mentioned above are retained for their proposed use. Nevertheless, should the Department retain housing zoning MCH05/09; the land would remain unsuitable for a C3 Use in that it would distort the housing allocation figures. These lands are also unavailable.
- **Comber Road, Dundonald**
The only site that was brought to our attention by a valuation agent as available on the open market was an 8.3 hectare parcel of land at Comber Road, which is zoned in Draft BMAP as employment/industry (MCH 08) and endorsed by the Commission. Albeit this site falls well short of the required site area, developing this vacant land for a Class C3 use would be contrary to Policy PED7 of PPS4 and the BMAP zoning declaring it unsuitable.

- 5.27 No additional sites of a suitable size were found within the catchment area.
- 5.28 Notwithstanding the above reasons, PricewaterhouseCoopers highlight that with its high infrastructure investment costs, Meadow Park could not compete with the high site acquisition prices of residential zoned land. Analysis of the high infrastructure costs therefore indicate that zoned residential land completely undermines the viability of delivering care infrastructure. As such, this assisted living project with a high calibre of facilities can only be delivered on a greenfield site.
- 5.29 The overall findings are that no other sites are suitable and/or available to accommodate the development proposals within the local area to which the development serves a need. Whilst the development is proposed on lands lying outside Castlereagh settlement limit, the application site abuts the development limit and is therefore the next logical place to locate the project. This paper has plainly demonstrated that the project is in compliance with PPS21 - It is essential and cannot be located in Castlereagh settlement.

6 Other Material Considerations

Landscape & Visual Issues

- 6.1 In addition to demonstrating the need for this project, it is recognised that the Department will also consider the landscape and visual impact on Castlereagh Escarpment Area of High Scenic Value (AOHSV). Coogan & Co and Park Hood Landscape Architects have already dealt with this aspect in a detailed Landscape and Visual Impact Assessment, and as such, their findings are not repeated in this document.

Socio-Economic Benefits

- 6.2 Furthermore, the development proposal will also create a significant amount of jobs over the 4 year construction period continuing through to the long-term operation of Meadow Park.

Phases	No. of Employees
Construction Phase	200-250 (+ 100 indirectly)
Operational Phase	50-70 full-time; 50-70 part-time and temporary staff
Total	300-390

Flooding Mitigation Measures

- 6.3 The applicant is willing to provide a Sustainable Urban Drainage (SUD) System that would help to alleviate any flooding that may be occurring downstream. This solution will bring gain to the surrounding local community that have been affected in recent times by intense rainfall within the Glen Road Stream catchment.



7 Summary & Conclusions

- 7.1 In conclusion, this supporting statement has clearly demonstrated how Meadow Park Care Village is an essential development proposal, and more importantly, necessary at Castlereagh. Underpinning the *Transforming Your Care Strategy*, this home-from-home model is fully supported by the Minister of Health, Edwin Poots and the Chief Executive of the South Eastern Health Trust. The ever-increasing pressure on the Health Trust with the growing ageing population, the continuing rise in dementia sufferers and the majority of statutory residential homes no longer admitting new patients, is adding daily pressures for alternative solutions to be found.
- 7.2 The Housing Executive carried out research into the need and demand for a retirement village and although undertaken six years ago, the findings demonstrate that the NI population is genuinely interested in the option of a retirement village. This interest in such a care model is more enhanced now with the increasing rise in the cost of private care homes and the imminent threat of statutory care home closures.
- 7.3 Castlereagh is an ideal location for such a project with the locality having the third highest mean age of NI population and the neighbouring Belfast District having the highest number of people over 65. Furthermore, the vicinity is an affluent part and would be suited to this type of facility. The Ipsos MORI survey found that a significant number (25%) of over 55s in the Castlereagh region would be likely to move to Meadow Park. As Meadow Park Care Village is essential and cannot be located within Castlereagh settlement, this development proposal should in principle be considered acceptable to the Department.
- 7.4 In terms of other key material factors, the planning documentation accompanying the planning application plainly demonstrates that the design and layout of the proposed scheme will not result in any significant adverse effect on the quality, character and features of the AOHSV. Furthermore, the project will create in the region of 300-390 posts for staff from inception through to operation. The potential for this project to create a high number of jobs should be given significant weight in the determination of this application.
- 7.5 In light of the critical need and the socio-economic benefits that Meadow Park brings to the Castlereagh region, the Department should not delay in approving this remarkable project.

ANNEX 1

Subject Site

DOE
Drawing
Number 01

BALLYGOWAN ROAD CASTLEREAGH

Area Planning Office
RECEIVED
29 JAN 2014
File No.
Brief 3



COOGAN & CO
CONSULTANTS LTD

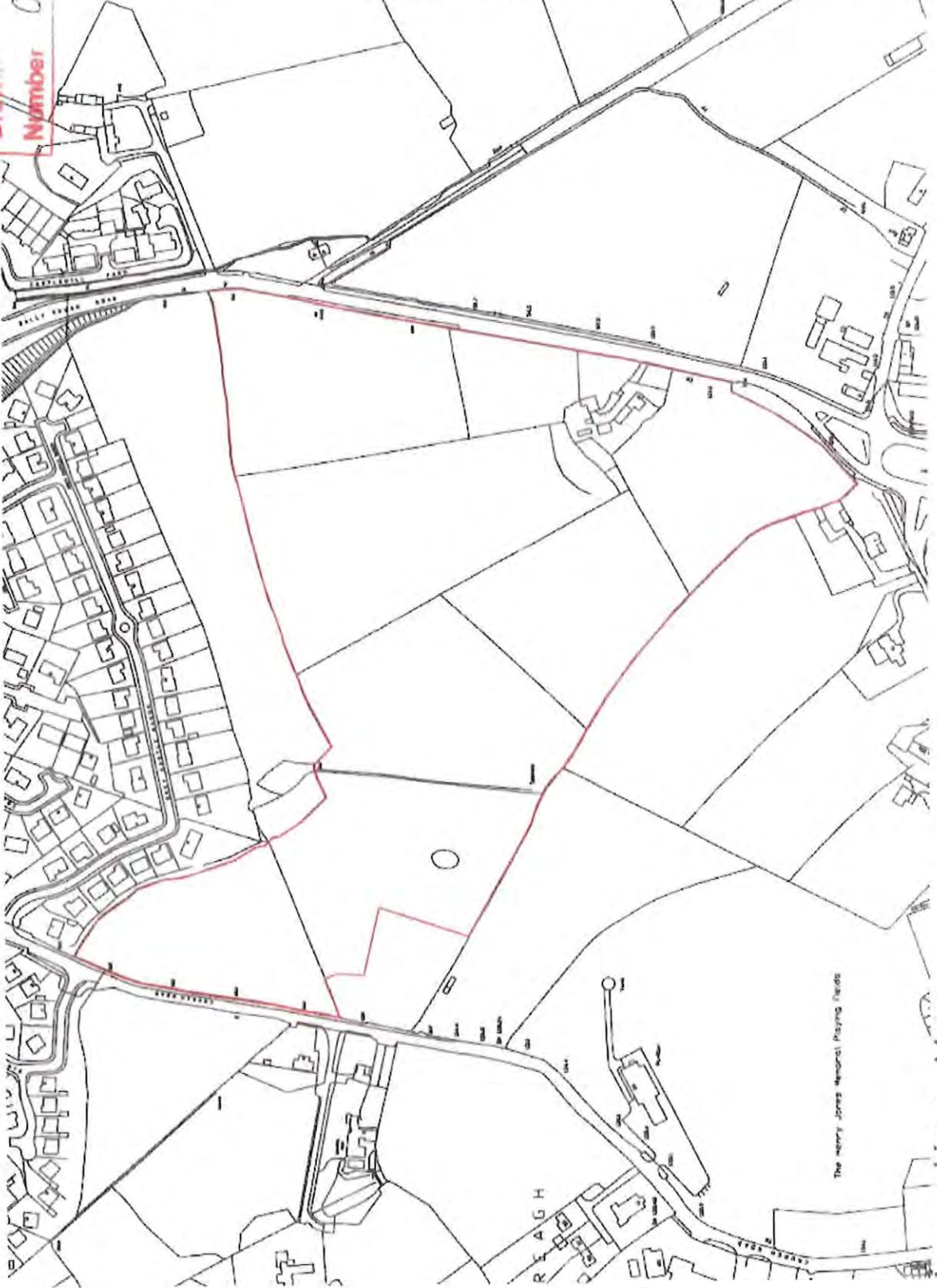
144 SPUR, LUSKIN ROAD, FINCHTOWN,
DUBLIN 15, IRELAND
T: 01280 301130
F: 01280 301131
E: info@cooganandco.ie

BALLYGOWAN ROAD
CASTLEREAGH

LOCATION MAP

1:500
8 A2
JAN 2014

13-175-01



Location Map

Manor Healthcare Letter

MANOR HEALTHCARE™

Coogan & Co
144 Upper Lisburn Road
Belfast
BT10 0BG

16th April 2014

Dear Sir,

Re: Meadow Park Assisted Living Care Village

Further to our discussions, I advise that "Manor Healthcare Limited" is a Northern Ireland based company, which is family owned.

The company is involved in the care of Frail Elderly people and has a total staff in Northern Ireland of c200 people.

With specific regard to the proposed development at "Meadow Park Care Village", I confirm that we are satisfied that the development will assist with fulfilling a growing need to provide both specialist nursing care and meet the Department of Health strategy of giving individuals care in their own home (i.e. "own door home for life"). This type of home-care is a fundamental strand of the Departments "Transforming Your Care" (TYC) policy.

In particular we consider that Manor Healthcare is especially suited to operate Meadow Park, due to our close working relationship with each of Northern Irelands Health Trusts and the industry governing body, the "Regulation and Quality Improvement Authority" (RQIA). Additionally our company is currently undergoing accreditation with the Northern Ireland Housing Association for its "Supporting People" scheme, which supports vulnerable adults in the community. When this accreditation is achieved Manor Healthcare will be the only privately owned company in NI to hold this status, leaving it well placed to assist a broad range of client groups. Furthermore we advise that MHL's range of registrations includes providing, nursing & residential care plus domiciliary care.

Having given consideration to the location of Meadow Park, we conclude that this development will meet the needs of both the Belfast & South Eastern Trust's, which together cater for the majority of NI's population.

From a design perspective Meadow Park will represent the only location in Northern Ireland, where all of the houses will be equipped with a range of "Assistive Technologies" as standard. These technologies are a key benefit in promoting the TYC ethos and include Bluetooth enabled devices, which will be centrally monitored by a locally operated call centre. This call centre will alert close hand assistance to service users in the event of healthcare or domestic emergencies. This facility will be privately funded by the users and help reduce



INVESTORS
IN PEOPLE

Kingscourt Nursing Home 928 Antrim Rd. Templepatrick. BT19 0AT T
Queenscourt Nursing Home 36 Daugh Rd. Belfast. BT39 9BG T
Rathfriland Manor Nursing Home Rosscorror Terrace, Rathfriland. BT34 5DJ F

W: www.manorhealthcare.org
Reg: 11001028

MANOR HEALTHCARE

the on-going dependency on the NHS to meet minor care needs of an aging population..

The Directors of Manor Healthcare have worked with "Bosch Healthcare" with a view to bringing its World-Class expertise to NI. Using their experience and our own analysis we conclude that to make schemes such as Meadow Park viable there needs to be a critical mass of clients/service users to meet the substantial capital expenditure and on going revenue costs relating to a site based responsive care team.

To date no one in Northern Ireland has established a dedicated community designed to meet future healthcare needs. However our research of existing clients indicates that, where possible, the older population have a desire to live in their own home in a setting that delivers security and the availability of assistance for both health & domestic needs at an affordable price. Meadow Park promises to meet this desire, whilst at the same time provide a quality setting in a semi-rural environment yet close to existing settlement and communities/family. Its location is ideal for its proposed population i.e; peaceful, tranquil setting within close proximity to an ageing population.

We at Manor Healthcare consider it important to emphasise that we have been actively trying to locate and identify a site, such as Meadow Park, for some considerable time, however without success. This has been due to many sites not being released for sale or due to developers/banks wanting to hold on to property to take advantage of increasing property prices. Consequently we believe that Meadow Park is the only suitable site for the proposed scheme.

In summary Meadow Park will meet many key needs of the aging population by providing them with their own home, healthcare support and the benefit of domestic support in a secure, yet modern, environment. As a consequence of the above we fully support this scheme and recognise its benefits to both the individuals and broader community.

I trust this information meets your requirements, however please do not hesitate in contacting me if you require any clarification.

Yours faithfully

Mark J King
Director

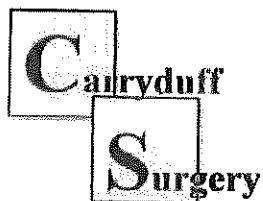
Kingscourt Nursing Home 92B Antrim Rd Templepatrick BT39 0JA
Queenscourt Nursing Home 36 Dough Rd Ballyclare BT39 9BG
Rathfriland Manor Nursing Home Rosscoma Terrace, Rathfriland BT34 5DJ



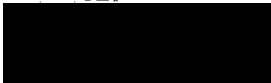
W: www.manorhealthcare.com
E: [REDACTED]
Reg: 191061628

ANNEX 3

Letters of Support



Hillsborough Road
Carryduff
Co Down
BT8 8HR



Dr K E Clarke	E605
Dr P J Sharkey	E672
Dr C C M McIvor	E1076
Dr U Mason	E1201
Dr A Murray	E1228

TO WHOM IT MAY CONCERN

Mr Patrick Kearney, Managing Director of PBN Holdings, approached me recently to discuss Meadow Park, Ballygowan Road, Castlereagh, an Extracare Retirement Village, which is currently going through the planning application process. This planned retirement village includes a medical facility. Carryduff Surgery would be happy to provide general practice input and support to this development.

I have had the opportunity to review the proposals. I think these meet a very significant need within our community and I feel on site medical support would be very beneficial.

Yours sincerely,

DR P.J. SHARKEY
MB BCh MRCP MRCGP DCH DMH DRCOG



South Eastern Health
and Social Care Trust

Directorate of Nursing, Primary
Care and Older People

25 February 2014

BY EMAIL



Dear Mr Mains

I trust that you found the material I forwarded to you following your recent meeting with the Chief Executive and I useful.

I can confirm that it would be the view of the Trust that the care facility you are proposing would be in line with an area of emerging and growing need. The concept would, therefore, receive support in principle from the Chief Executive.

Regards

Nicki Patterson
Director of Primary Care, Older People &
Executive Director of Nursing

Trust Headquarters, Ulster Hospital, Upper Newtownards Road, Belfast BT16 1RH
Tel: 028 90553147 Email: Nicki.Patterson@setrust.hscni.net

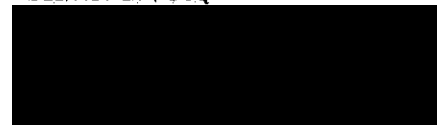
FROM THE MINISTER FOR HEALTH,
SOCIAL SERVICES AND PUBLIC SAFETY
Edwin Poots MLA



Department of
**Health, Social Services
and Public Safety**

www.dhsspsni.gov.uk

Castle Buildings
Stormont Estate
BELFAST BT4 3SQ



Date: 2 December 2013

Dear Sirs,

Thank you for outlining your proposals last Tuesday for a retirement village in Castlereagh. It is certainly an attractive concept and fits well with elements of the Transforming Your Care strategy I am seeking to implement.

The ability for individuals to access differing levels of care over time without having to move to a new area is very positive. My Department's policy is that older people should be able to live in their own home environment for as long as possible, with tiered support and care available as required.

I look forward to hearing of your progress as you proceed with the project.

Edwin Poots
Minister for Health Social Services and Public Safety

www.dhsspsni.gov.uk



ANNEX 4

List of Amenities

Meadow Park Care Village

Provision of Amenities

1. Care / Well Being Centre

- Assisted living suites and skilled care beds
- Guest suites
- Coffee shop
- Games room
- Library
- Lounges
- Cinema room
- Gardens, terraces and walks
- Walled garden with Greenhouse
- Allotments
- Fishing Pond

2. Village Centre

- Indoor swimming pool
- Spa/sauna and fitness suite
- Restaurant and bar
- Village shops (pharmacy, hair & beauty salon)
- Medical Centre with GP's surgery, physio, dental and fitness
- Function rooms for dance, arts/crafts classes
- Multi-purpose sports hall for yoga, badminton, table tennis, golf simulator
- Bowling green
- Putting green
- Tennis courts
- Multi-purpose sports court
- Walks/trails of 2.5km

ANNEX 5

Population Figures

STATISTICAL REPORT – 2012-BASED POPULATION PROJECTIONS



9:30am – Wednesday 6 November 2013

The Northern Ireland population is projected to reach 1.9 million people in 2020 from 1.824 million in 2012. This is according to figures released today by the Northern Ireland Statistics and Research Agency.

Key findings include:

- the population is projected to increase to 1.918 million in 2022 from 1.824 million in 2012, an average annual rate of growth of 0.5%;
- natural growth is the driver of the projected population increase: between 2012 and 2022 there will be 99,000 more births than deaths;
- while the population aged under 65 is projected to increase by 1.5% (24,000 people) from 2012 to 2022, the population aged 65 or more will increase by 26% (71,000 people);
- longer-term projections show the real impact of the marked increase in the size of the population at older ages. The number of people aged 65 and over is projected to increase by 44% in the next fifteen years (2012-2027); and
- the Northern Ireland population is projected to exceed 2.0 million by 2036.

This statistical report outlines some of the detail behind the 2012-based population projections for Northern Ireland.

Background

This report details the key findings from the 2012-based national population projections, which replaced the 2010-based projections published in October 2011. National population projections by age and sex are produced every two years for the UK and its constituent countries by the Office for National Statistics (ONS) on behalf of the National Statistician and the Registrars General of Scotland and Northern Ireland.

The projections are based on the most recently available mid-year population estimates (currently 2012) and a set of underlying demographic assumptions regarding fertility, mortality and migration. The 2012 mid-year population estimates are based on the 2011 Census results, which also led to a revision of population and migration estimates for the period 2001 to 2011. Subsequently, fertility and mortality rates of recent years were amended, which in turn were considered to set the long-term assumptions for the population projections.

These projections are not forecasts and do not attempt to predict the impact that future government policies, changing economic circumstances or other factors might have on demographic behaviour. The primary purpose of the national projections is to provide an estimate of the future size and age structure of the population. Population projections are widely used in policy development, in areas as diverse as pensions, housing, healthcare and education.

Methodology

Population projections are produced using the cohort component methodology, akin to the mid-year population estimates, and starting from the most recent estimates (2012). Each year, the population is "aged on" by one year and adjustments are made for births, deaths and migration. However, unlike population estimates, these components of change are not observed but projected. This is done by applying assumptions on the number of children each woman will have (fertility) and the chance of dying (mortality) to the starting population, and adjusting for assumed movement of people into and out of Northern Ireland (net migration).

Assumptions

Population projections are by definition based on assumptions about future fertility, mortality and migration levels. In these population projections it is assumed that:

- the hypothetical "average woman" in Northern Ireland will have 2.00 children in her lifetime. There is a six-year period to move gradually from the current fertility level to the long-term assumption that applies from mid-2018 onwards;
- people will continue to live longer, with death rates continuing to fall and thus leading to a higher life expectancy. In the long term, improvement in mortality rates are projected to be 1.2% per annum; and
- over the next six years 3,000 more people will leave Northern Ireland than come here to live. Beyond this migration will be in balance with the same number of people coming here to live as leaving each year. These assumptions are based on recent trends in migration and do not attempt to predict the impact of government policies on, for example, migration and student fees. Note that whilst the total migration is in balance, there is a projected net gain for children (+1,000) and persons aged 40 to 59 years (+500), compared to a net loss for persons aged 16 to 24 (-1,400).

Results

The Northern Ireland population is projected to rise by 48,000 persons in the five years between 2012 and 2017, an increase of 2.6% (see [Table 1](#) and [Figure 2](#)). This is markedly less than the estimated 3.5% population growth between 2007 and 2012. With broadly similar mortality and fertility rates, the difference between these two periods is predominantly explained by the net migration position moving from net inflow of 8,000 persons in the year ending mid-2008, to a position of moderate net outflow from mid-2010 onwards.

In the intermediate term, the Northern Ireland population is projected to increase to 1.957 million in 2027, a rise of 7.3% or 0.5% per year. It is projected that Northern Ireland reaches a population of 1.9 million in 2020 (see [Table 3](#)). It is in this period that the long-term assumptions on fertility and migration have been reached, although there is a continued improvement in mortality rates leading to higher life expectancies.

In the long run, after 25 projected years, the Northern Ireland population will stand at 2.005 million by 2037, where the 2 million milestone will be reached in the previous year. By then, annual population growth has fallen below 0.2% or 4,000 persons due to a falling number of births and rising deaths as a result of an aging population.

Population projections become increasingly uncertain further in time. For example, fertility assumptions are applied to a female population that hasn't been born yet in 2012, driving the number of births in the long run. The remainder of this report will focus on the projections in the intermediate run, 2012 to 2027.

Age-Distribution

The number of children¹ in Northern Ireland is projected to increase from 382,000 children in 2012 to 401,000 children in 2022, before falling again to 392,000 children in 2027 (see [Figure 3](#)). The population growth is roughly similar to the net migration gain in this period, whilst the number of births is broadly in line with the number of children leaving this age group through aging-out or mortality.

The number of people aged 16 to 64 is projected to increase marginally from 1,169,000 people in 2012 to 1,173,000 people in 2027 (0.3% increase). Despite losing around 1,000 persons through migration out of Northern Ireland, the number of persons aging into this age group outnumbers those leaving through aging out or mortality.

Under current legislation, the state pensionable age will be increased from 65 for males and 60 for females to 66 for both sexes between April 2010 and April 2020. This means that by mid-2012, all females aged 60 and 15 per cent of females aged 61 will be of state pensionable age. In addition, under current legislation, pension age for both males and females is planned to increase further to 68 between 2024 and 2046 (see notes 8 and 9). Taking this into account, the number of people of working age in Northern Ireland is projected to rise by nearly six per cent from 1,132,000 in mid-2012 to 1,196,000 in mid-2027 (see [Table 2](#) and [Figure 4](#)).

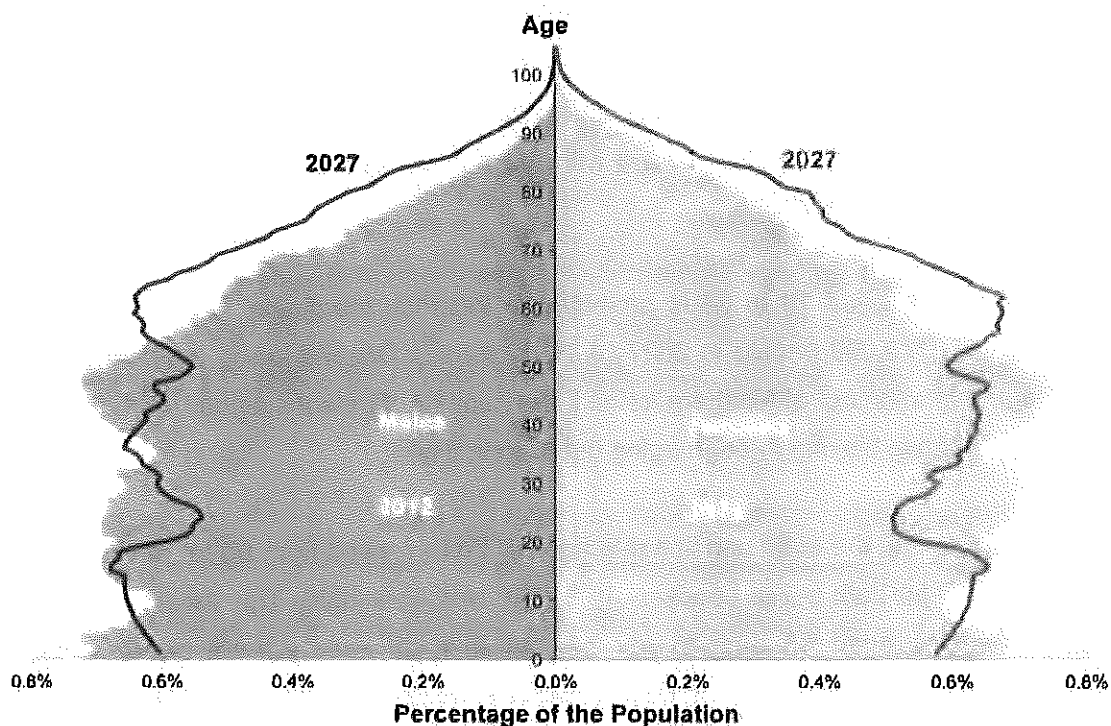
The number of people aged 65 and over is projected to increase markedly from 273,000 in 2012 to 344,000 in 2022 (+26%) and reaching 392,000 in 2027. For this age group, migration is negligible; therefore, the population growth is solely due to a surplus of persons

¹ Children are those aged under 16 years.

aging into this age group over mortality losses. In fact, the population growth of 44% over the 15-year period is synonymous with the percentage of the population aged 65 and over in 2012 who will still be in that age group by 2017 (albeit 15 years older), whereas the 2012 population will broadly be replaced by persons aging into this age group adjusted for mortality.

The projected change in age distribution can be demonstrated in a population pyramid (see Figure 1 below), which shows the estimated 2012 and projected 2027 population by single year of age and sex. It is clear that the cohort of persons born around 1967, in their mid to late forties in 2012, will be aged around 60 in 2027. It is this generation that will reach pensionable age within the following decade.

Figure 1: Population pyramid, 2012 and projected 2027 by single year of age and sex



[Download Chart \(XLS format – 3,567Kb\)](#)

[Interactive population pyramid](#)

It is evident that the age profile of the population will gradually become older. The average age will rise from 38.3 years in 2012 to 41.4 years by 2027. This is most noticeable at the higher ages: in 2012, the population aged 86 and over exceeds the number of births, whilst by 2027 this is true for the population aged 90 and over. The population will continue to age after 2027. For example, the number of persons aged 85 and over is projected to increase by nearly 50% in the next decade, whilst by 2029 there are projected to be twice as many people aged 85 and over than there are today.

Births and deaths

The projected number of births is a result of the assumptions on age-specific fertility rates and the size of the female population of child-bearing years. Up until mid-2017, around 24,500 births are projected. After this 5-year period, the number of births is projected to fall steadily to 22,600 births in the year ending mid-2027, 11% below the number of births that occurred in the year ending mid-2012 (see [Figure 5](#)).

In contrast, the number of deaths is projected to increase gradually by the same percentage (11%) as the fall in births, from 14,200 in the year ending mid-2012 to 15,800 in the year ending mid-2027. At the root of this projected trend is the aging population, despite the assumed improvements in life expectancy.

Comparison with previous projection

The 2012-based population projections cannot be easily compared to the previous population projections, published in October 2011, which were based on the 2010 mid-year population estimates. These projections were released prior to the availability of 2011 Census results, which has led to a revision of population and migration estimates for the period 2001 to 2011. In turn, revised population estimates required a recalculation of historic fertility and mortality rates, to feed into setting long-term assumptions for population projections.

Only the long-term assumption on fertility has been changed, from 1.95 to 2.00 children per woman in her lifetime (Total Period Fertility Rate or TPF_R) between the 2010-based and 2012-based projections. This change was made as, by 2012, the TPF_R remained on or above 2.00 in the last six years. Note that in the 2010-based projections, the TPF_R was 2.06 in the base year and therefore had to be reduced gradually to 2.00 in 2017 and reaching 1.95 by 2020.

In both projections, the long-term migration assumption was that of zero net migration. However, between 2010 and 2012, the net migration position for Northern Ireland changed from moderate inflows (+1,000 persons) to moderate outflows (-1,000), which were accounted for in setting the short-term run-in period (see [Figure 6](#)). This is in contrast to 2004-8 when migration added 32,000 persons to the population, however, since then emigration has risen and immigration has fallen.

The 2010-based population projection for 2012 was less than 300 persons (0.1%) short of the 2012 mid-year population estimates, so that both projections start roughly from the same basis. The impact of the short-term run-in periods for fertility and migration meant that under the 2012-based projections, the population was 10,000 persons or 0.5% smaller by 2017 compared to the 2010-based projections (see [Figure 7](#)). This difference slowly erodes as the changed long-term fertility assumption takes effect, although by 2027 it still amounts to 8,000 persons or a 0.4% smaller population in the 2012-based projections. This demonstrates how higher migration and fertility in the short-term continues to impact on the population in the intermediate and long-term respectively as new entrants and their offspring enter childbearing age.

Population projections for the UK and the Republic of Ireland

The Northern Ireland population projections are produced as part of the UK population projections, which generates figures for each of the four constituent countries (England, Wales, Scotland and Northern Ireland). As such, this provides consistent comparable results. Long-term assumptions are set for each country separately based on regional demographic trends. Whilst Northern Ireland has the highest fertility assumption, it is also the only country without expected population growth through migration, which adds 165,000 persons to the UK population each year. Over 11 years, this amounts to the current size of the Northern Ireland population.

Between 2012 and 2027, the Northern Ireland population is projected to grow by 7.3% compared to a growth of 9.8% for the UK as a whole. This rise can be mainly attributed to England, which receives the vast majority of net migration (87%) and has the highest life expectancy of the four countries. Aided by relatively high fertility rates, Northern Ireland population growth is projected to outperform those of Wales and Scotland.

Population projections for the Republic of Ireland are produced by the Central Statistics Office (CSO). Unlike UK projections, CSO does not produce a principal projection; whilst there is a single assumption on life expectancy, there are two variant fertility assumptions (high/low) and three migration scenarios. Their most recent 2011-based projections show projected population growth between 2011 and 2026 varying from 6.1% under low fertility/migration to 16.0% under high fertility/migration assumptions. The average of all six combinations of assumptions suggests a projected population growth of 11% over a 15-year period.

Variant Projections

Alongside the principal population projections (described above), several variant projections are released based on different assumptions on fertility, mortality and migration (see [Figure 8](#)). They can be used to assess the impact of alternative assumptions or to isolate the impact of certain demographic components. For example, the low life expectancy (or high mortality) variant assumes that there is no continued improvement in mortality rates. Although this assumption has a moderate effect on the total population – 6.9% growth between 2012 and 2027 compared to 7.3% in the principal projections – its impact on the older population is markedly different with the population aged 65 and over growing by 42% rather than 44% under the principal projection.

Another example is the net migration assumption in the principal projection which indicates that the same number of people come here to live as leave each year. However, it still allows for a net gain of children and a net loss of young working age people. In particular, there are relatively large flows of Northern Ireland students who move to the rest of the UK for study, and not all of them are returning. The zero migration variant projection constrains migration at all ages to zero. Under this variant, the Northern Ireland population is projected to increase by 7.8% between 2012 and 2027, slightly higher than the growth under the principal projection (7.3%). The difference can be largely explained by the number of births the young working age females would have had if they did not leave Northern Ireland.

The tables and figures below summarise information regarding the population projections. They are taken forward until 2037 to give a longer term indication of the projection beyond the next 15 years.

The following tables and figures are attached:

Table 1: Projected components of population change, 2012-2037

Table 2: Projected age distribution of population, 2012-2037

Figure 2: Population of Northern Ireland, actual and projected, 1981-2037

Table 3: Projected population by age group, 2012-2037

Figure 3: Children aged under 16 and adults aged 65 and over, actual and projected, 1981-2037

Figure 4: Population aged 16 to 64, actual and projected, 1981-2037

Figure 5: Births and deaths, actual and projected, 1981-2037

Figure 6: Net migration, actual and projected, 1981-2037

Figure 7: Population under 2010-based and 2012-based projections, 1991-2037

Figure 8: Total population under principal and variant projections, 1991-2037

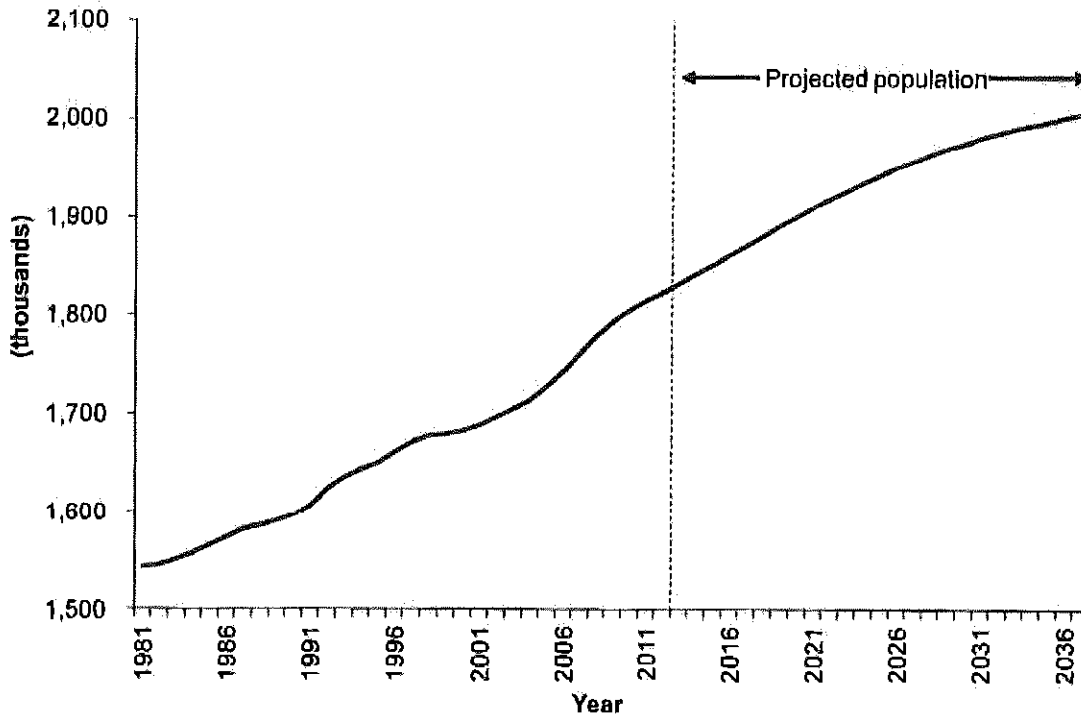
Table 1: Projected components of population change, 2012-2037 (annual averages)
(Thousands)

	2012-2017	2017-2022	2022-2027	2027-2032	2032-2037
Population at start	1,823.6	1,871.2	1,918.5	1,956.7	1,984.6
Births (average)	24.6	24.1	23.1	22.1	21.9
Deaths (average)	14.5	14.7	15.4	16.6	17.9
Natural change	10.1	9.5	7.6	5.6	4.0
Net migration (average)	-0.6	0.0	0.0	0.0	0.0
Population at end	1,871.2	1,918.5	1,956.7	1,984.6	2,004.5

Table 2: Projected age distribution of population, 2012-2037 (percentages)

	2012	2017	2022	2027	2032	2037
Children (Under 16)	21	21	21	20	19	18
Adult Population (16-64)	64	63	61	60	58	57
Older population (65+)	15	16	18	20	22	24
Working age population ²	62	62	62	61	60	60
Pensionable population ²	17	17	17	19	21	22

Figure 2: Population of Northern Ireland, actual and projected, 1981-2037 (non-zero y-axis)



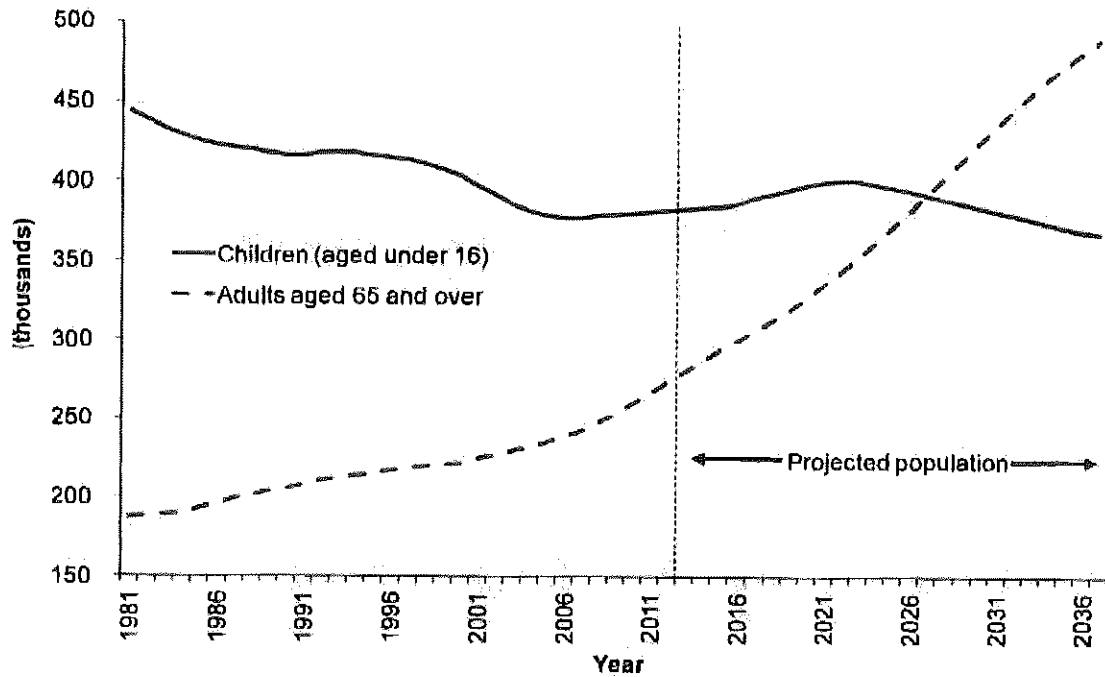
[Download Chart \(XLS format – 3,494Kb\)](#)

² Working age and pensionable population take into account the forthcoming changes in State Pensionable age (see also background notes 8 and 9)

Table 3: Projected population by age group, 2012-2037 (thousands)

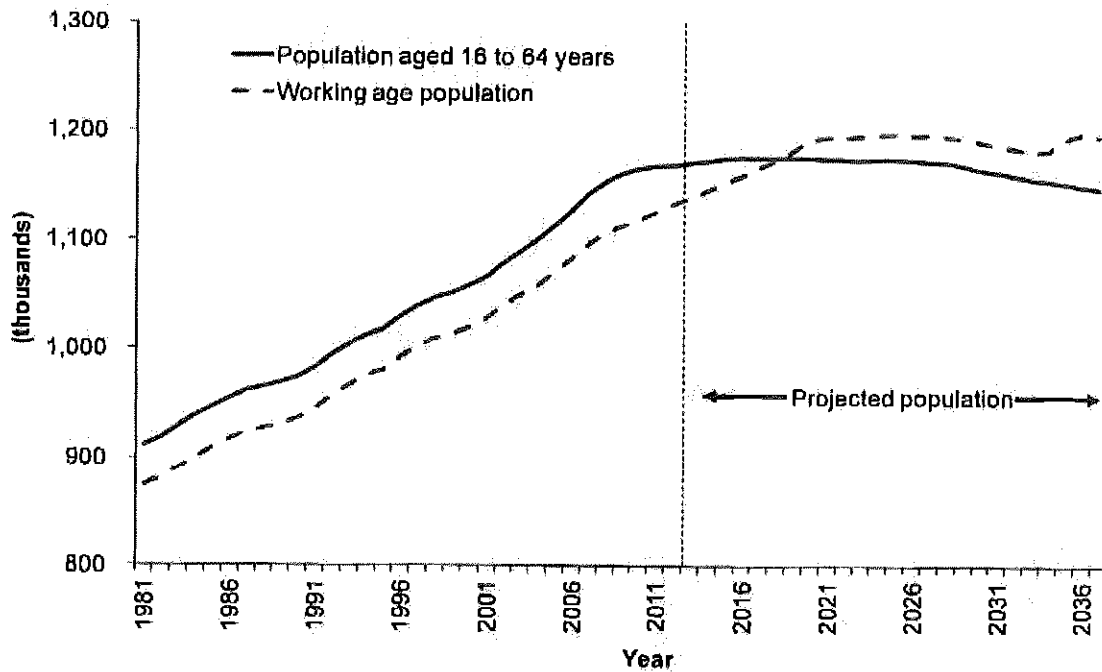
Year	Children (Aged under 16)	Adult Population (Aged 16-64)	Older population (Aged 65 and over)	Total
2012	382	1,169	273	1,824
2013	382	1,171	279	1,832
2014	383	1,172	286	1,842
2015	384	1,174	293	1,852
2016	386	1,175	300	1,861
2017	389	1,176	306	1,871
2018	392	1,176	313	1,881
2019	395	1,175	320	1,891
2020	398	1,175	327	1,900
2021	400	1,175	335	1,910
2022	401	1,174	344	1,918
2023	400	1,174	353	1,927
2024	398	1,174	362	1,935
2025	396	1,175	372	1,943
2026	394	1,174	382	1,950
2027	392	1,173	392	1,957
2028	389	1,171	403	1,963
2029	387	1,168	414	1,969
2030	384	1,165	425	1,975
2031	382	1,162	436	1,980
2032	379	1,160	446	1,985
2033	376	1,157	456	1,989
2034	374	1,155	465	1,993
2035	372	1,152	473	1,997
2036	369	1,150	482	2,001
2037	367	1,148	489	2,005

Figure 3: Children aged under 16 and adults aged 65 and over, actual and projected, 1981-2037 (non-zero y-axis)



[Download Chart \(XLS format – 3,497Kb\)](#)

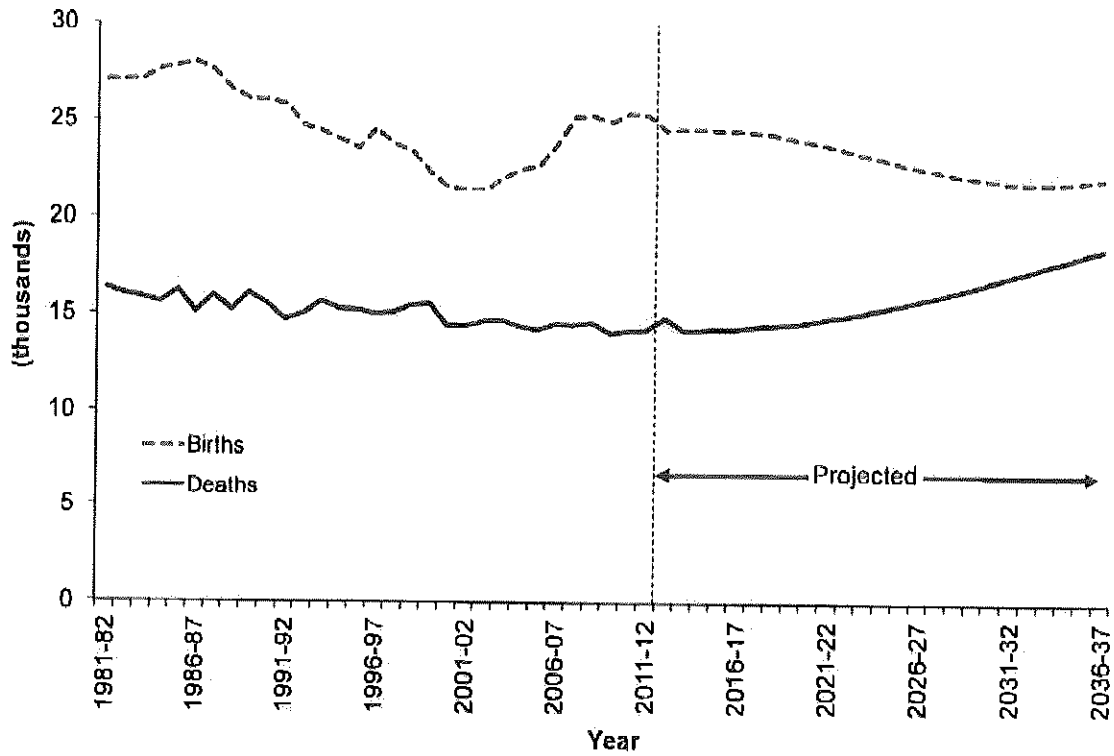
Figure 4: Population aged 16 to 64 and working age population³, actual and projected, 1981-2037 (non-zero y-axis)



[Download Chart \(XLS format – 3,496Kb\)](#)

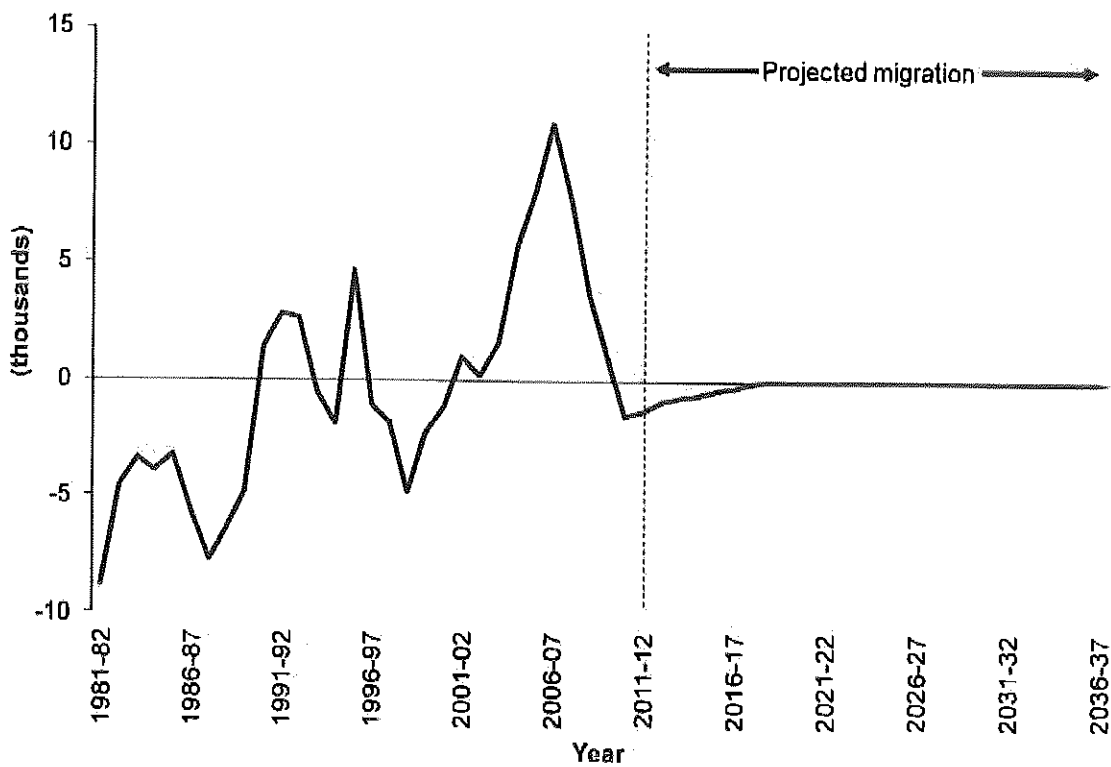
³ Working age population takes into account the changes in pensionable age from passed Pension Acts.

Figure 5: Births and deaths, actual and projected, 1981-82 to 2036-37



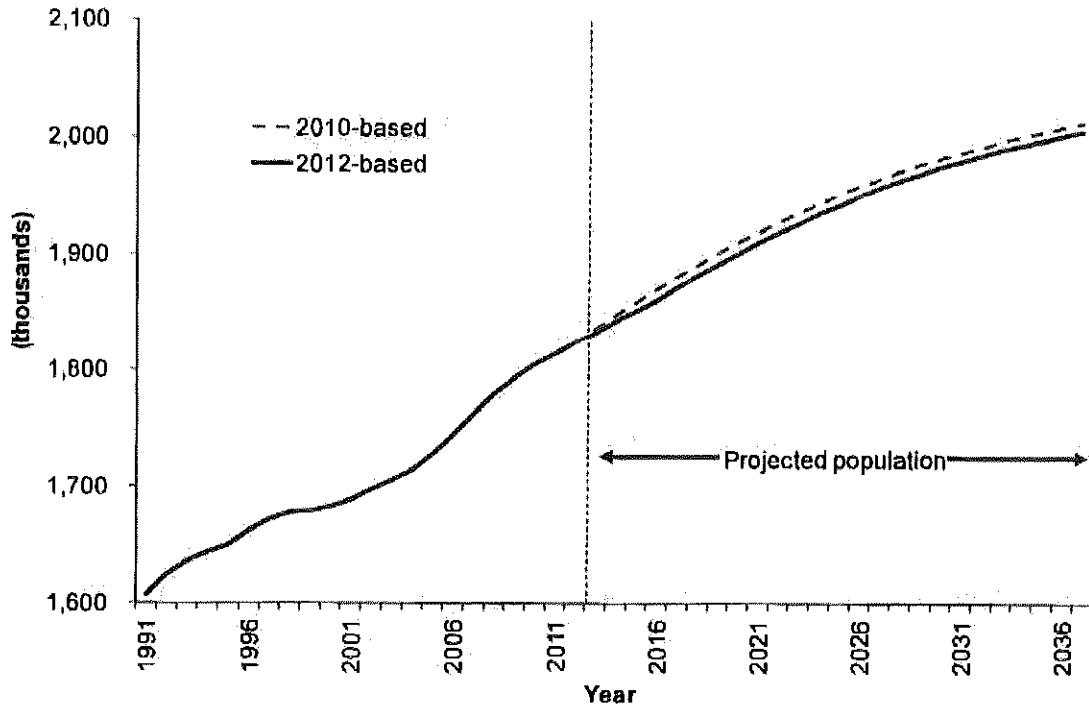
[Download Chart \(XLS format – 3,500Kb\)](#)

Figure 6: Net Migration, actual and projected, 1981-82 to 2036-37



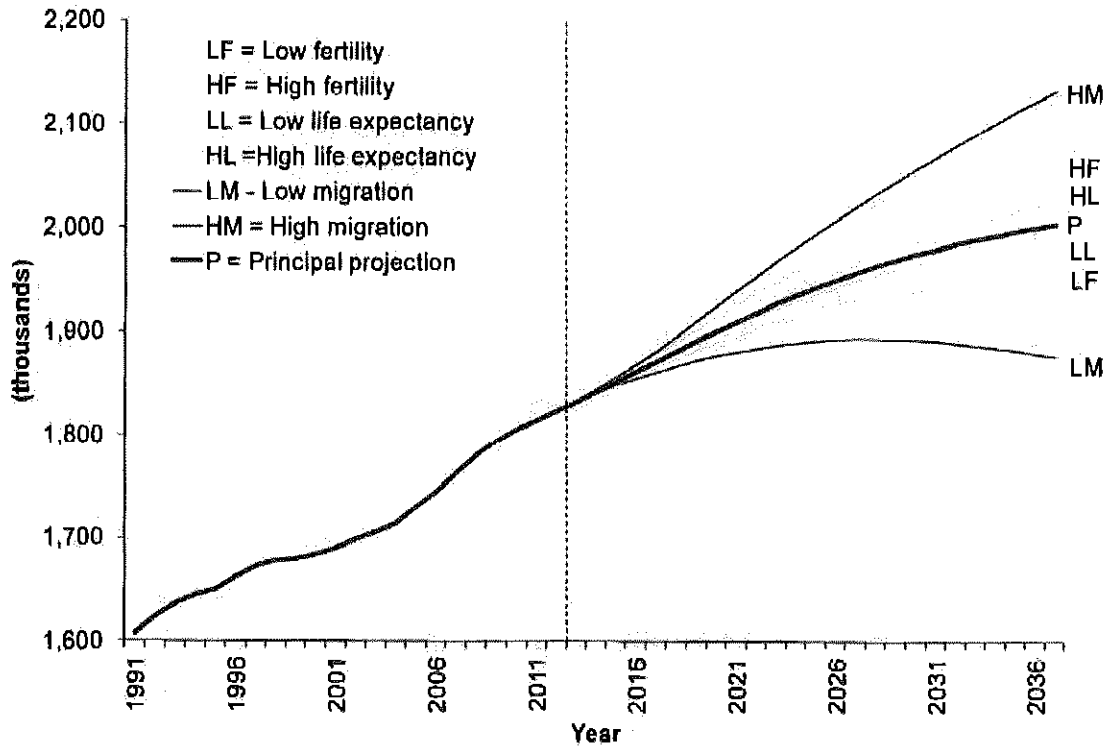
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Figure 7: Population under 2010-based and 2012-based projections, 1991-2037
(non-zero y-axis)



[Download Chart \(XLS format – 3,496Kb\)](#)

Figure 8: Total population under Principal and variant projections, 1991-2037
(non-zero y-axis)



[Download Chart \(XLS format – 3,521Kb\)](#)

NOTES TO EDITORS

1. The Office for National Statistics (ONS) produces national population projections for the United Kingdom and constituent countries at the request of the Registrars General for England and Wales, Scotland and Northern Ireland. Projections are made every second year, based on a review of the trends affecting fertility, mortality and migration.
2. The primary purpose of the national projections is to provide an estimate of the future size and age structure of the population of the UK (and of its constituent countries) which is used as a common framework for national planning in a number of different fields. These official sets of projections ensure that the many users of population projections can work on consistent assumptions.
3. The Northern Ireland projections are also available on the NISRA website at: <http://www.nisra.gov.uk/demography/default.asp20.htm>. Population projections for administrative areas within Northern Ireland are planned for Spring 2014.
4. An interactive population pyramid can be found at the NINIS website: http://www.ninis2.nisra.gov.uk/InteractiveMaps/Population/Population%20Pyramids/MYE%202012/Pop_Pyramid_June2013.html
5. Full results of the 2012-based national population projections for the United Kingdom and its constituent countries, including variant projections, are available at the ONS website: www.ons.gov.uk/ons/rel/npp/national-population-projections/2012-based-projections/index.html
6. Earlier this year, the Central Statistics Office published Population and Labour Force Projections for the Republic of Ireland: <http://www.cso.ie/en/releasesandpublications/population/populationandlabourforceprojections2016-2046/>
7. Projections are the result of applying long-term assumptions described in the report. These assumptions are based on recent trends in fertility, mortality and migration, and do not take account of future policies, for example, on student fees. If different assumptions are used different results would result – a series of alternative population projections (variants) are also produced and these are available on the ONS website.

8. Under the provisions of recent Pensions Acts, the State Pension age for women will increase from 60 to 65 between April 2010 and November 2018. Thereafter, the State Pension age for both men and women will start to increase to reach 66 by 2020. In addition, State Pension age is planned to increase to 67 between 2034 and 2036, and to 68 between 2044 and 2046. For further details, see:

<http://www.nidirect.gov.uk/index/information-and-services/pensions-and-retirement-planning/pensions-and-retirement/state-pension/changes-to-the-state-pension/changes-to-the-planned-increase-in-state-pension-age.htm>

9. The data presented in this bulletin do not reflect proposed further changes to the state pension age published by the government. They propose bringing forward the increase to State Pension age 67, to be phased in between 2026 and 2028. These proposed changes are not yet law and still require the approval of Parliament. Further information relating to these proposals can be found at:

www.gov.uk/changes-state-pension

10. All media inquiries should be directed to DFP Press Office

Telephone: 

Fax: 

11. Further statistical information can be obtained from NISRA Customer Services:

Telephone: 

Fax: 

E-mail: 

Responsible Statistician: Dr David Marshall

The Detail Article

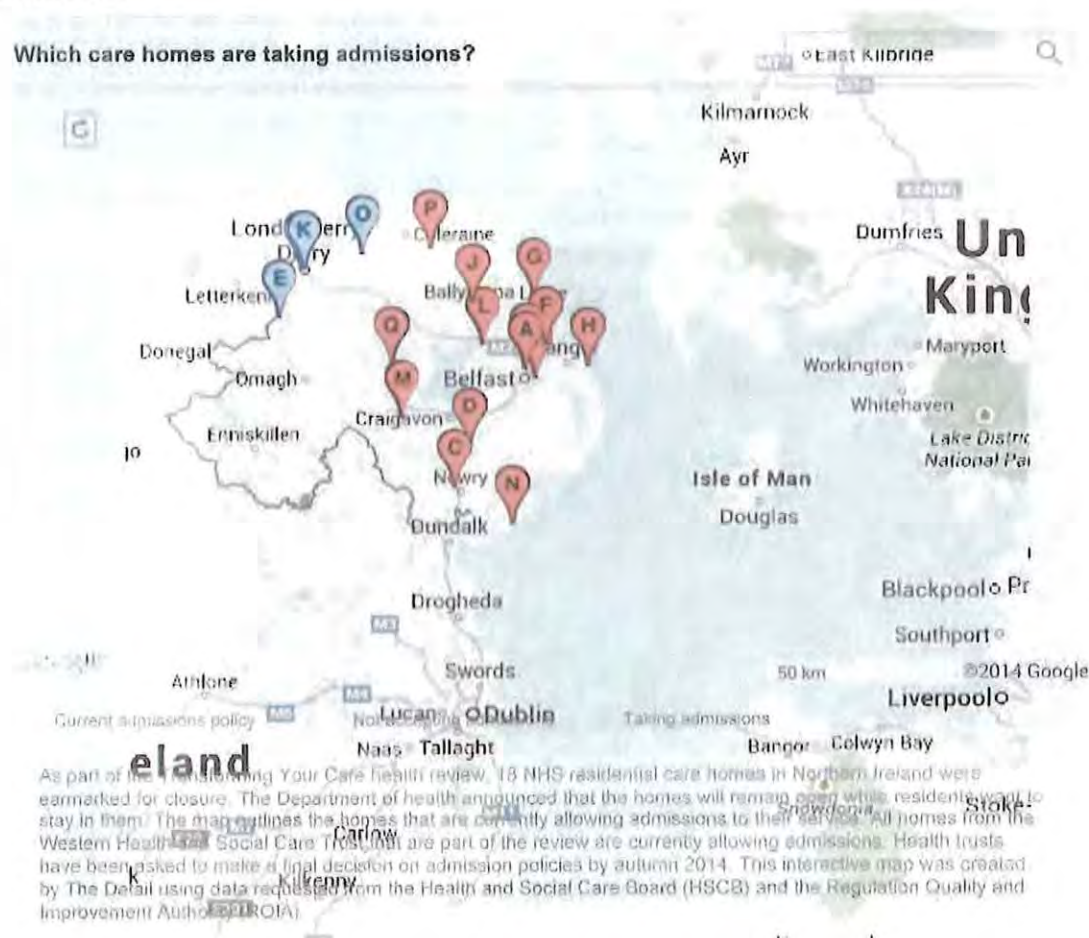
Investigations & Analysis - Northern Ireland

thedetail

Health trusts to look again at future of care homes

12 JUNE 2014

Which care homes are taking admissions?



View [Which care homes are taking admissions?](#) in a full screen map

By Niall McCracken

HEALTH trusts are being asked to revisit their admissions policy for older people going into residential care homes across Northern Ireland.

As part of fundamental reforms of how health care is delivered here, a number of homes had been earmarked for closure, but following a public outcry a fresh consultation on the matter was announced in August 2013.

<http://www.thedetail.tv/issues/337/tyc-care-homes-funding/health-trusts-to-look-again...> 09/09/2014

The Health and Social Care Board today approved new criteria that will be used to decide whether or not a home should allow new patient admissions.

Health trusts will be asked to make a final decision on a homes admission policy by autumn 2014 but the long term future of these facilities hinges on whether they can admit new residents.

The map above compiled by The Detail shows that out of the 18 homes currently under review, only four are currently taking permanent admissions. These are all based in the Western Trust area.

The reforms are being reconsidered as part of Transforming Your Care (TYC) – the Department of Health's roadmap to shift the focus of health care from hospitals to the community.

At it's monthly meeting today the board also assured residents that it was firmly committed to the Minister's position that they would be able to remain in their existing home for as long as they wish and as long as their care needs can continue to be met.

However, The Detail can reveal that the organisation in charge of implementing the reforms has said that the scale of change needed by the end of the year may be "unachievable".

The latest progress report published by the Health and Social Care Board and seen by The Detail states there is a risk that plans to move resources into community care by the end of the year are "overly ambitious and the scale of change required across a complex system is unachievable".

Documentation seen by The Detail also shows that a bid for additional money for TYC is ranked only eleventh in a priority funding list submitted by the Department of Health to the Department of Finance.

THE CHANGING FACE OF HEALTHCARE



There are currently 18 homes with 240 permanent residents within the review

The plans for residential care in Northern Ireland have been a key element of TYC reforms since they were first announced in 2011.

Residential care homes across Northern Ireland offer services in a number of categories including those with a learning disability.

Under current plans only trust-run (statutory) residential care homes that accommodate the frail and elderly face potential closure.

Last year these plans were the subject of criticism after it became clear that the proposed closure of 50% of statutory residential care homes in Northern Ireland were being swiftly implemented by a number of individual health trusts.

It emerged that a number of trusts planned to shut all of their statutory residential care homes for older people. This forced the Health Minister to intervene and withdraw the trusts' power to make these decisions.

The Health Social Care Board, at its monthly public meeting today announced details about the criteria that will be used by health trusts to decide whether or not their residential care homes should remain open.

The four proposed criteria outlined in the consultation document were; Quality of Care, Availability and Accessibility of Alternatives, Care Trends and Best Value for Money.

There are currently 18 homes with 240 permanent residents within the review.

The board said it received over 1,200 responses to its public consultation with the overriding message from residents being that they did not want to move.

Speaking today Fionnuala McAndrew, Acting Chief Executive with the Board said:

"Many of the views expressed by respondents to the consultation were about wider health and social care issues and concerns about how any proposed changes would be managed. Whilst not all respondents were in agreement with the type of change which may result, the majority of respondents did not disagree strongly with the proposed criteria.

"I listened to residents describe the care they receive in the homes, and how their lives have been enriched by living in residential care. They told me that the Quality of Care should be the most important criterion and should be given the highest weighting when assessing homes in the future. This was also reflected strongly in the feedback from other respondents. Respondents also agreed that the Best Use of Public Money should retain the lowest weighting.

Mrs McAndrew concluded, "I recognise that this process has caused anxiety for residents, their families and carers but I hope that the Minister's statements and our commitment to them will provide the reassurance needed to ensure that any future changes can be managed in a way that does not cause any further concerns.

"There will always be a need for some level of residential care but the changing trends and desires of people must be taken into account too as we plan for the future," she said.

FUNDING GAP

Meanwhile as part of the latest bid for Stormont's pot of unspent money, the Department of Health is asking for over £20m to help plug the funding shortfall in transitional funding for Transforming Your Care.

In a previous [article](#) The Detail revealed that TYC plans suffered a massive funding blow because of the need for the Department of Health to pay out millions of pounds in clinical negligence cases last year.

The TYC consultation document published in December 2011 outlined a proposed re-investment of £83m from current hospital spend into primary, community and social care services over a five year period.

To support this change it was identified that there was a need for an extra £70m in transitional funding over the first three years to allow the new model of services to be implemented.

In recent weeks Department of Health officials told Stormont's Health Committee that the £70m is now required over a five-year period rather than the initial three-year period.

To date, only £28m of the required £70m has been allocated to TYC transitional funding, leaving a gap of £42m.

The TYC review identified the need for transitional funding over a three year period to enable the implementation of the new model of service.

June monitoring round bid

TYC transitional funding	2012/13	2013/14	2014/15
Projected funding	£25m	£25m	£20m
Funding received	£19m	£9.4m	£0 (to date)

This is when the Department of Finance shares out unspent money between Stormont departments who have pitched for additional finances.

Monitoring rounds take place three times during the financial year, in January, June and October.

The department secured £19m transitional funding in 2011/12 for TYC and a further £9m during 2012/13.

Despite a bid of £7m in January this year, the department failed to receive any TYC transitional funding.

Now in the latest June monitoring round the department is bidding for £21 million for TYC transitional funding, as part of an overall bid of £160m to address pressures across the health and social care sector.

The Detail asked the department to provide a full breakdown of the June monitoring bid as well as the priority rating they were assigned.

June monitoring round bid

TYC transitional funding	2012/13	2013/14	2014/15
Projected funding	£25m	£25m	£20m
Funding received	£19m	£9.4m	£0 (to date)

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As well as TYC funding others bids relate to unscheduled care and emergency admissions, elective care and specialist services, such as drugs, and cancer services.

Under the Department of Finance and Personnel rules for monitoring rounds, departments are asked to prioritise their bids as A, B or C. Category A refers to inescapable expenditure, category B to expenditure having a direct impact on the department's ability to meet wider pressures and category C to expenditure not contractually committed to that could be scaled back if needed.

A spokesperson said: "All of the department's June Monitoring bids are of significant strategic importance it does not mean that any particular bid is less important from the Department's perspective."

The outcome of June Monitoring will be announced in the Assembly once the Executive has agreed a position at the end of the month.

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ANNEX 7

IPSOS MORI SURVEY

9th September 2014

Meadow Park Care Village Research

Report prepared for Strategic Planning

Confidential

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Executive summary

Strategic Planning commissioned Ipsos MORI to undertake a survey of residents in Castlereagh, Carryduff, Comber and the surrounding area to assess potential interest in and demand for Meadow Park Care Village, on the outskirts of Castlereagh.

The survey was designed to capture views on the development, the proposed facilities, likelihood to move there in the future, factors that would influence interest in Meadow Park and barriers to moving there.

Five hundred and fifty interviews were conducted between 3rd and 16th June 2014; 405 with individuals aged 55 and over, who own their own homes and would be classified as ABC1C2 social class, and 145 with individuals aged 40-54 whose parents own and occupy their own home and are classified as ABC1C2.

Over 55s interviewed asked a series of questions relating to their attitudes towards Meadow Park from their perspective and how they would feel about moving to it. Meanwhile, 40-54s were asked the questions about how their parents may feel about Meadow Park and the extent to which they would encourage their parents to move to the development.

All interviews were conducted face-to-face, in-home using Computer Assisted Personal Interviewing (CAPI) technology.

A copy of the questionnaire is appended to this report.

- Firstly, it is important to contextualise the findings of this survey. The majority of survey participants aged 55 and over have children (86%) and grandchildren (69%) and in a significant number of cases, children and grandchildren live within five miles. Furthermore, many (39%) have friends living within a five mile radius and half (50%) of those aged 40-54 know that their parents' friends live close by.
- 80% of over 55s say that is important that they live close i.e. within ten miles of family and friends, while 82% of 40-54s say that it is important for their parents to live close to relatives and

friends. Only 16% say it is not important to live close to relative or friends.

- The presence of family and friends is not the only reason that it is important for people to live within their current locale. Almost two thirds of over 55s socialise, take part in a range of hobbies or are involved in local community groups, while 77% of 40-54s know that their parents socialise locally.
- Almost all over 55s stress the importance of continuing to take part in their current social and sporting activities if they were to move, particularly when it comes to attending church, church groups or local community groups.
- Two in five (39%) over 55s have made plans on where they will live and for the care they may need as they get older. Many would prefer to stay in their own home, while others would stay at home with the assistance of a care package, while others would downsize. Those aged 40-54 also stated that their parents' preference would be to remain at home or potentially downsize.
- All participants were presented with a map of Meadow Park showing the layout of the site and the facilities on offer. Overall interest in Meadow Park is high, with a quarter of over 55s interviewed saying they would be likely to move to the development and just under a quarter of 40-54s would be likely to encourage their parents to move to it.
- The facilities are a big draw for over 55s and 40-54s believe the facilities would be appealing for their parents.
- Many believe that the development has all the facilities that a person would ever need and of most importance for a large proportion is the provision of on-site healthcare such as the GP surgery and a pharmacy.
- For over 55s, the 60 foot indoor swimming pool is considered an important facility, as is the availability of transport to areas outside of the development.
- For 40-54s, there is an emphasis on future plans ensuring that parents are safe and secure and they are particularly keen on the idea of having 24 hour care, which helps alleviate any pressure they may feel to be constantly present. They also feel

that Meadow Park would provide a sense of community and would give their parents a certain degree of independence.

- Given how important it is to those interviewed to remain in the local area, it may not be unexpected that the proximity of Meadow Park to where over 55s and the parents of 40-54s is considered beneficial (38% of over 55s and 31% of 40-54s)
- However, tennis courts and putting greens are of least importance to both over 55s and 40-54s.
- In addition, a large proportion of both over 55s (89%) and 40-54s (78%) believe that the provision of supported living is important. Similar proportions also believe that the availability of 24 hour care is important (89% of over 55s and 79% of 40-54s).
- The majority of over 55s and 40-54s say they would expect to pay a service or maintenance fee if they or their parents lived in Meadow Park to contribute towards the upkeep of the development.
- Having reviewed the information on Meadow Park, a quarter (25%) of over 55s said they would be likely to move to the development, with just over half claiming they would be unlikely to move.
- Of the over 55s who say they would be likely to move to Meadow Park, over a third (35%) would consider moving there within the next five years, with a further 18% saying they would possibly move within the next 10 years.
- Meanwhile, just under a quarter (22%) of 40-54s would encourage their parents to consider moving to Meadow Park, with 57% saying they would be unlikely to do so.
- Among the 40-54s who would encourage their parents to move to the development, over half (56%) would persuade them to do so in the next five years.
- The main reason 40-54s would not encourage their parents to move to Meadow Park is that their parents are happy in their current home.

Background and methodology

Strategic Planning commissioned Ipsos MORI to undertake a survey of residents in Castlereagh, Carryduff, Comber and the surrounding area to assess potential interest in and demand for Meadow Park Care Village, on the outskirts of Castlereagh.

The survey was designed to capture views on the development, the proposed facilities, likelihood to move there in the future, factors that would influence interest in Meadow Park and barriers to moving there.

The remainder of this section details how Ipsos MORI conducted the survey.

Given the topic of the project, the survey particularly focussed on the target audience for a retirement village i.e. individuals aged 55 and over, who are owner occupiers and are can be classified as ABC1C2. 405 interviews were conducted with this audience.

To supplement this, 150 interviews were conducted with people aged 40-54, with one or both parents still living, who own and still occupy their home, and classified as ABC1C2.

In order to meet the objectives of the research, we used a form of random sampling called a random walk. Using 2011 Census data, we identified areas that had a high concentration of the target audiences within the catchment area. We selected the top 40 areas and used these as sampling points.

From this, we matched street names to the area. A starting point was selected at one street and interviewers were instructed to adopt a random walk visiting every second house in an attempt to yield an interview with a suitable individual. This ensured a spread across the region and no clustering in one neighbourhood, but was not restrictive, in terms of finding individuals who fit the required demographic criteria.

All interviews were conducted face-to-face and in the home of the participant using Computer Assisted Personal Interviewing (CAPI).

All interviewing was conducted between 3rd and 17th June 2014 and was conducted within the catchment area identified by Strategic Planning.

Ipsos MORI worked in partnership with Strategic Planning to produce a final questionnaire covering all key lines of questioning and a full description of Meadow Park.

A questionnaire and version of the description used by all project interviews is appended to this document.

The table below shows the reliability of data of the two sample sizes at an overall level. For example, if we find that 50% of the survey population would be interested in living at the retirement village in the future, the range within which the true figure would lie, if the whole population had been interviewed, would be ± 4 points, 95 times out of 100. In fact, the "true" figure is more likely to lie at the mid-point of the range, rather than at either extreme.

Sample size	Sampling tolerances applicable to results at or near these percentages (based on 95%		
	10/90%	30/70%	50%
	$\pm\%$	$\pm\%$	$\pm\%$
750	± 2	± 3	± 4
500	± 3	± 4	± 4

Participant profile

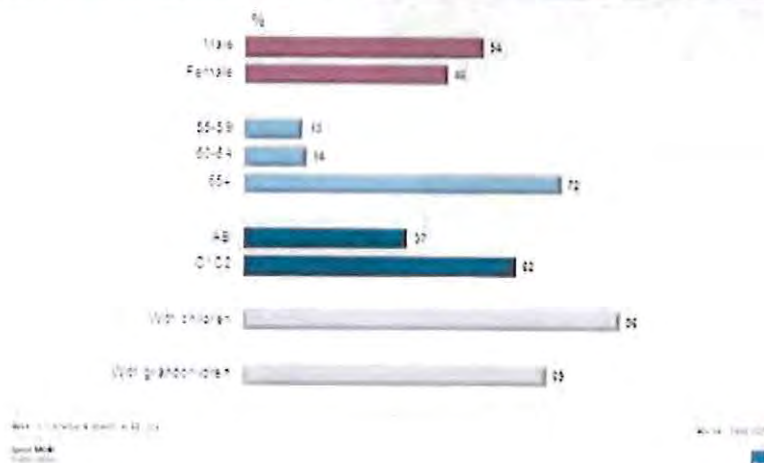
Participant profile

The main audience of the research was participants aged 55 and over, who are owner occupiers and ABC1C2. Interviews were also conducted with a smaller number of 40-54 year olds, whose parents are owner occupiers and are also ABC1C2s.

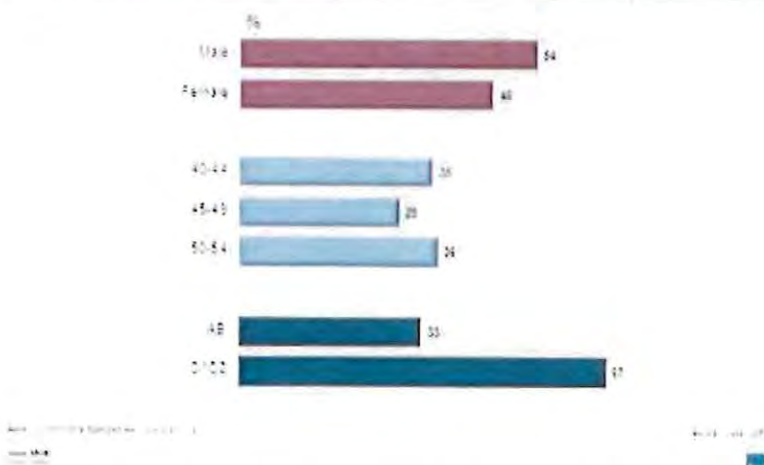
Before detailing the key findings of the research it is important to provide context, in terms of where participants live, where their families and closest friends, and where they tend to socialise.

Among over 55s, almost nine in ten (86%) have children and seven in ten (69%) have grandchildren.

Participant profile (over 55s)



Participant profile (40-55s)



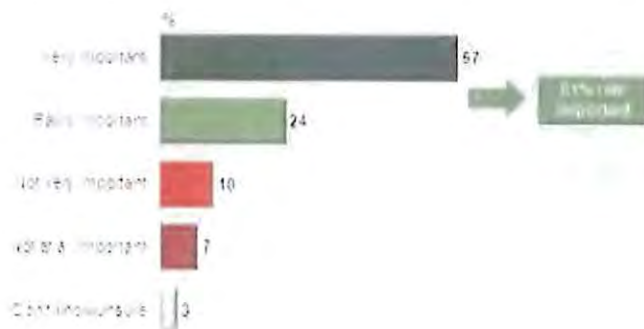
The children of over 55s have tended to stay close to their parents, with 69% living within five miles. Furthermore, grandchildren also tend to live close by, with 60% of grandchildren living within five miles.

For many (39%) their close friends live within five miles with an additional 23% saying their friends live within 30 miles of their home. Furthermore, 40-54s interviewed say that in many cases the majority of their parents' friends live within a couple of miles of them (50%), with others spread around the outside of the catchment area.

Taking this into account, it is not surprising that 81% of over 55s say it is important that they live close i.e. within ten miles to friends and family; for 57% this is regarded as 'very' important. Just 16% say that living close to relatives or friends is not important to them.

Importance of living close to family and friends

Q27 How important is it that you live close i.e. within ten miles to family and friends?



40-54s reinforce this point further, with 82% claiming it would be important to their parents that they live close to family and friends. 63% say this would be very important to their parents. Other research on ageing has revealed that having a support network is vital as people get older.

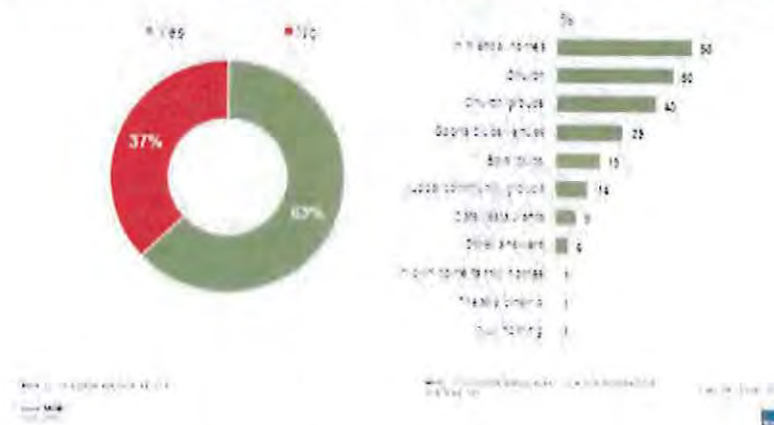
Staying within the local area is clearly important to many over 55s, not just because of family and friends, but also for hobbies and socialisation. Almost two thirds (63%) of over 55s surveyed remain within the local area to socialise and attend groups or clubs they belong to and 77% of 40-54s are aware that their parents socialise locally.

Over 55s tend to socialise at a variety of venues within their local area. Given that many have friends living close by, it would not be unexpected that the most common place for them to socialise is at friends' homes (58%). Church or place of worship is also a popular setting to meet with friends, with half (50%) of over 55s surveyed specifically mentioning church and 43% citing church groups as local places they socialise in.

Just under a third (29%) visit local sports clubs, while 19% frequent local bars. Meanwhile, others (14%) are involved in the community and attend local community groups.

Socialising in the local area

Do you tend to socialise in the local area? And in what types of places do you tend to socialise?



Virtually all over 55s stress the importance of continuing to participate in their social and sporting activities if they were to move. 98% say that it would be important to continue going to their church and/or church groups and for 97% it would be essential that they could still attend local community groups. Visiting friends' houses and playing at sports clubs is also important for 96% of over 55s.

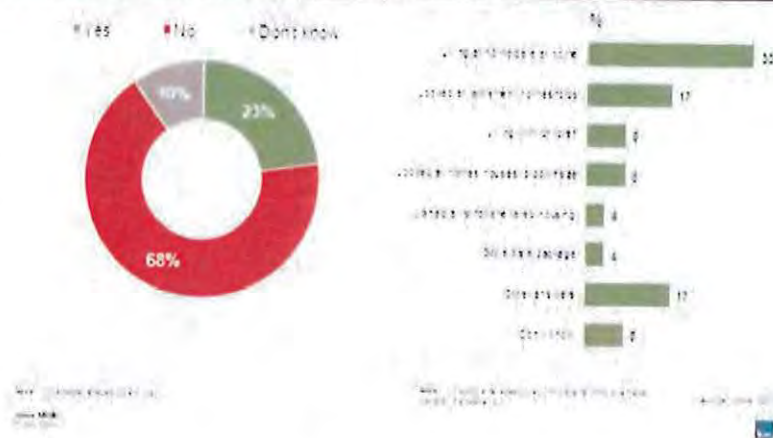
This is combined with 40-54s who are also aware of the importance of their parents continuing their social activities in the settings or venues that they are used to.

Planning for the future

For just under a quarter (23%) of 40-54s, their parents have already made housing and care arrangements for their future. A third (33%) has arranged to stay at home and have a care package in place, while 17% have enquired into retirement homes and folds. 8% have looked at smaller homes, to enable them to downsize, while an additional 8% have made arrangements to live with their children.

Specific plans made by parents for the future

Have your parents made any plans, in terms of where you may live or the care you may need as you get older?



Awareness of retirement villages

What does the term 'retirement villages' mean to you?

Among over 55s, the majority (70%) has heard of the term 'retirement villages' and the phrase elicits a wide variety of associations.

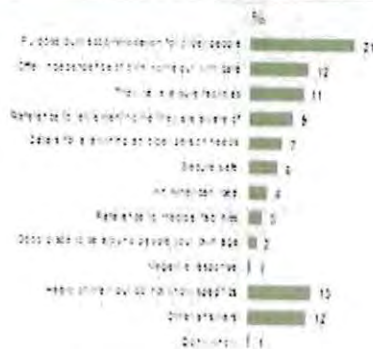
For one in five (21%), a retirement village is a purpose built, gated community for older people, while for others retirement villages are known to offer independence of living in a house with care in place (12%) and to have a wide range of leisure facilities on site (11%).

A small number (6%) specifically mentioned that retirement villages would be safe and secure.

However, some (13%) had simply heard of the term and know nothing of what a retirement village contains.

Awareness of retirement villages among over 55s

Have you heard of the term 'retirement village'?



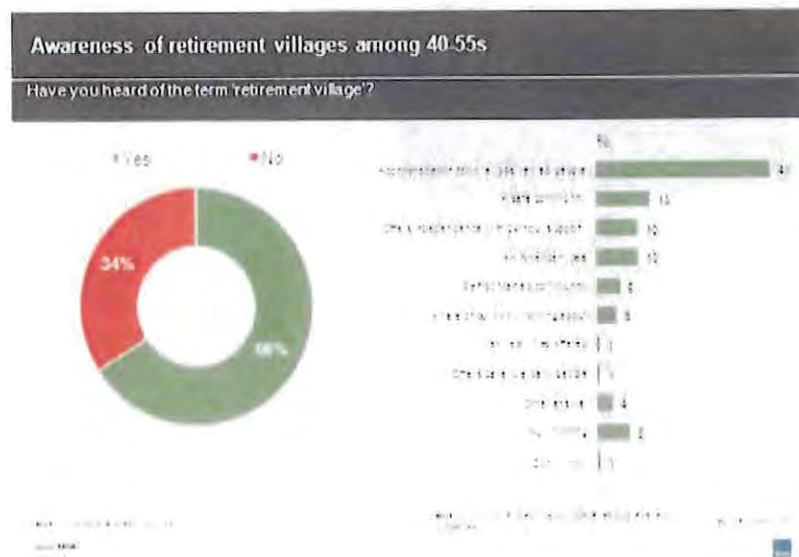
The main expectations of retirement villages is that they would offer:

- A large number of facilities (54%);
- Sheltered housing (52%);
- A variety of activities for older people (51%); and
- Around the clock care (48%).

Similarly, the majority of 40-54s (66%) are aware of the phrase 'retirement village' and have several key associations with the term including:

- Accommodation suited to the needs of over 55s or retired people (41%);
- A safe community (13%);
- An American concept (10%); and
- It offers independence with 24 hour support if needed.

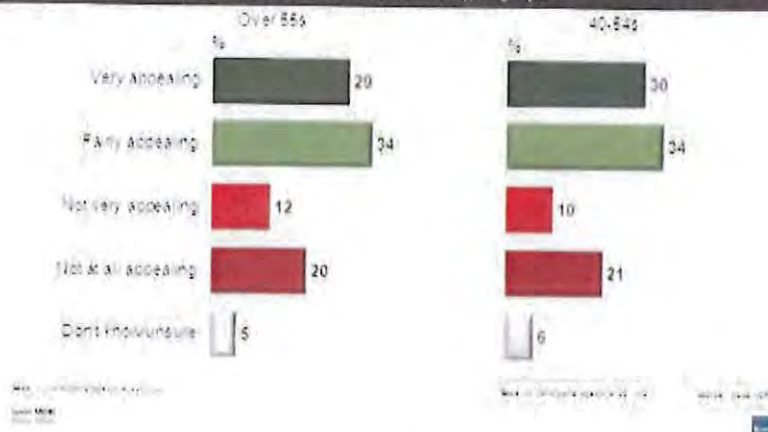
The 40-54 audience have a similar understanding of what retirement villages are to the over 55s. They are primarily known to offer sheltered housing (61%), and also provide around the clock care (59%), a large number of facilities (53%), and a variety of activities for older people.



The concept of a retirement village is attractive to many, with 63% of both 40-54s and over 55s saying they find the idea appealing, with almost a third of both audiences finding it very appealing (30% of 40-54s and 29% of over 55s).

Appeal of the retirement village concept

Retirement villages are for people aged 55 and over. They offer housing in a secure development, often with gates and/or restricted access. Residents have their own front door, a range of facilities and social activities alongside a range of care and support services that can cater for a person's health and care needs as they get older. To what extent does this sound appealing to you?



Views on Meadow Park Cars Village

Participants were presented with a map of Meadow Park and interviewers used a showcard containing a description of the site (see Appendix 2) providing information on proposed housing, the grounds and the facilities that would be on offer.

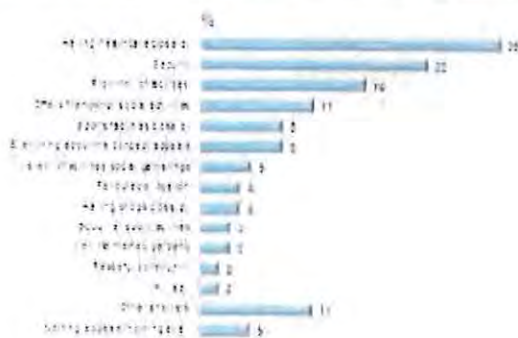
Once participants were familiar with the proposed development, they were asked what immediately appealed to them. For one in five (19%) over 55s having access to medical care within the development is appealing, while 14% cited the security that the village would offer as beneficial. One in ten (10%) spoke more generally of the benefits of having facilities, in general, close by, while others (7%) liked the fact that the village may provide the opportunity to meet friends and have a social life.

Other aspects that immediately appealed to over 55s are the sports facilities within the development (5%), the variety of activities on-site (3%), the retail units that would be in the vicinity (2%) and the favourable location of the village (2%).

For 5% of this audience, all aspects of the site immediately appeals to them, while just 3% said that nothing about the village appeals to them.

Appeal of Meadow Park among over 55s

Having heard all the information about Meadow Park, what aspects immediately appeal to you?



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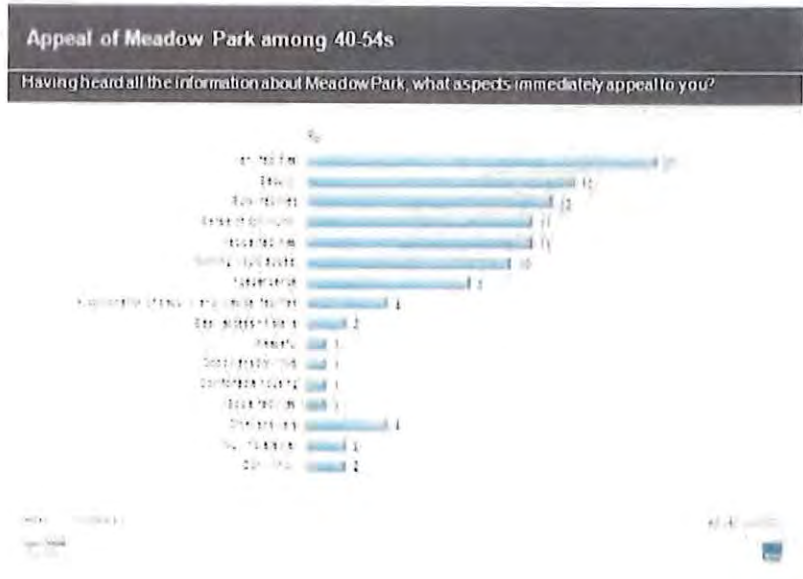


With regard to 40-54s who may have to consider a development such as Meadow Park for their parents, there are a number of aspects that they believe would be appealing to their parents.

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The vast number of facilities on-site would be attractive to their parents (17%), while 13% think the security of the development would be appealing. For one in ten, the range of on-site medical facilities (11%) and sporting facilities (10%) would be an incentive.

40-54s could see that Meadow Park would provide a sense of community for their parents (11%), but they would still have a certain degree of independence (8%).



With regards to the main benefits of Meadow Park, almost two-thirds (64%) of over 55s feel that it has all the facilities they would need, with 48% citing the care packages as beneficial. This is more likely to be seen as beneficial among participants who are aged 65 and over.

The idea that Meadow Park would be like a real community is considered beneficial (41%) as is the fact that people would have company and like-minded individuals around them (39%).

The proposed location of the development and its proximity to where they currently live is also a benefit for two in five (38%).

A small number (5%) say that no aspects of the site are particularly beneficial from their perspective.

When all mentions are aggregated to gain an overview of the most mentioned facilities, it is clear that health care facilities are considered essential to over 55s. Three quarters (77%) rate a GP surgery as important, while 58% consider it important to have an on-site pharmacy. Clearly, the social aspect of the village is appealing, as a sizeable proportion (43%) of over 55s rate restaurants and bars as important, while others (40%) regard public transport to social outings as imperative.

While sporting facilities are still popular, they are of less importance to over 55s. Over a quarter (27%) feel it would be important to have a 60 foot indoor swimming pool, while 13% are keen on the concept of the bowling green. However, tennis courts (5%) or a putting green (4%) are less important to them.

Importance of on-site facilities among over 55s

Which of these facilities would be most important to you?

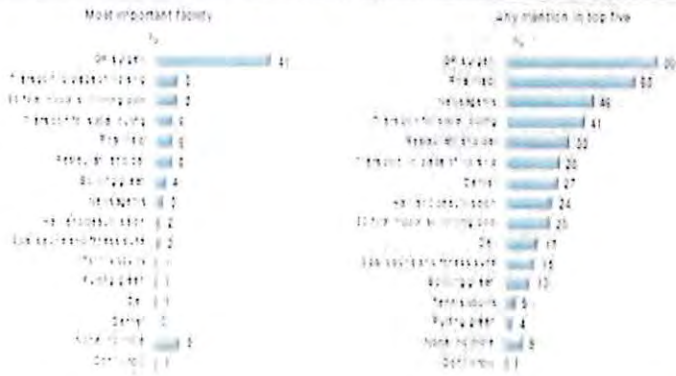


In a similar story to over 55s, medical based facilities are perceived to be important to the parents of 40-54s. 80% of this audience rank an on-site GP surgery as important to their parents, followed by a pharmacy (68%). Other facilities or services perceived as important for parents are the newsagents (46%) and transport to social outings (41%).

Tennis courts and a putting green are not rated particularly important by 40-54s (5% and 4% respectively).

Importance of on site facilities among over 40-54s

Which of these facilities would be most important to your parent(s)?



Given that many residents are expected to pay a maintenance fee for the upkeep of communal areas now, it is perhaps not a surprise that the majority (82%) of over 55s would expect to pay a service or maintenance fee. This is particularly the case among 55-59 year olds compared to older age groups (93% compared to 90% of 60-64s and 79% of over 65s).

In addition, 75% of 40-54s believe their parents would expect to pay a service or maintenance charge for the upkeep of the village.

Maintenance or service charge in Meadow Park

Would you expect to pay a service or maintenance charge for upkeep of the village?
 Would your parents expect to pay a service or maintenance charge for upkeep of the village?



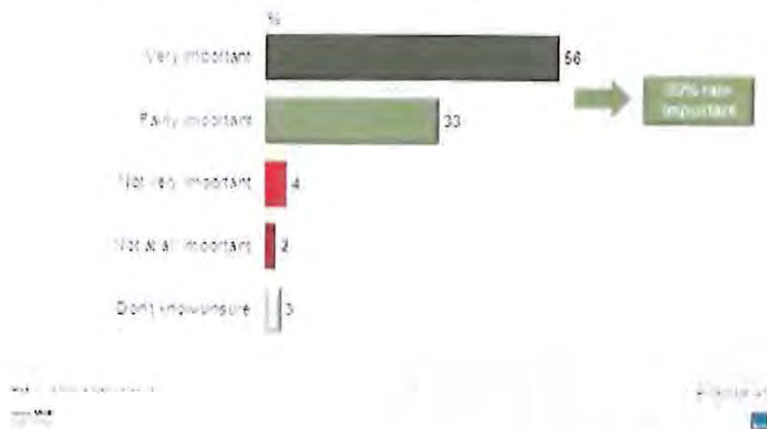
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The availability of support to live independently has mass appeal; the majority (89%) of over 55s interviewed say that it is important that Meadow Park offers supported living, with 56% claiming it is 'very' important. This figure is consistently high across all age groups over 55.

Just 7% of those interviewed do not regard supported living as not very important or not at all important.

Importance of supported living among over 55s

How important is it that supported living would be available at Meadow Park?



Meanwhile, three quarters (78%) of 40-54s believe that the provision of supported living at Meadow Park would be important to their parents; over half (55%) say this would be very important. Just 17% do not think that this would be an important service from their parent's perspective.

Importance of supported living among 40-54s

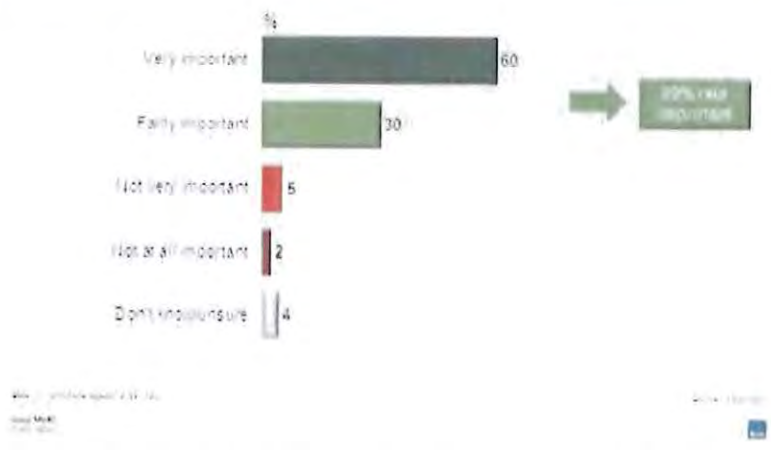
How important is it that supported living would be available at Meadow Park?



The majority of over 55s (89%) also believe that the availability of 24 hour care is important, with 60% rating it as 'very' important. Again, with a small proportion of the sample (7%) regards 24 hour care as either not very important or not at all important.

Importance of 24 hour care among over 55s

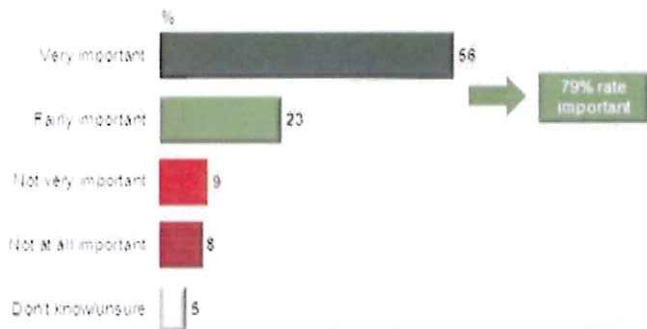
How important is it that 24 hour care would be available at Meadow Park?



Slightly fewer 40-54s (79%) feel that the provision of 24 hour care would be important to their parents. 17% indicates that this type of care would not be important to their parents.

Importance of 24 hour care among 40-54s

How important is it that 24 hour care would be available at Meadow Park?



Likelihood to move to Meadow Park Care Village

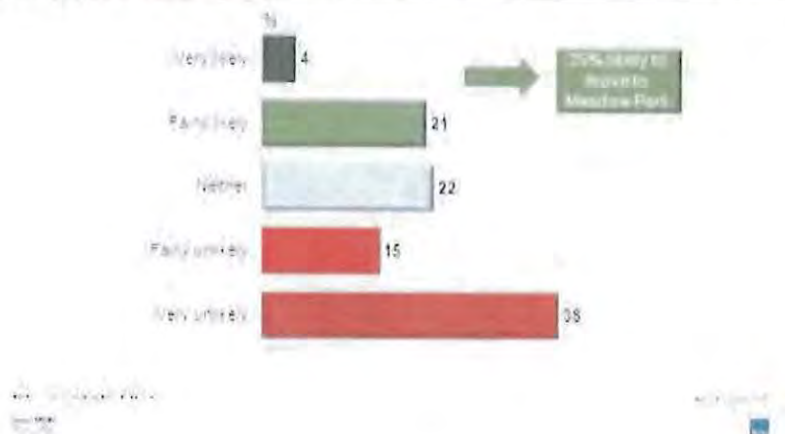
How likely are you to move to Meadow Park, Cote Village?

Having presented the over 55s who were surveyed with details about the proposed development, they were asked how likely or unlikely it would be for them to move to Meadow Park.

A quarter (25%) of over 55s said they would be likely to move to Meadow Park, with just over half (53%) claiming they would be unlikely to move there.

Likelihood to move to Meadow Park among over 55s

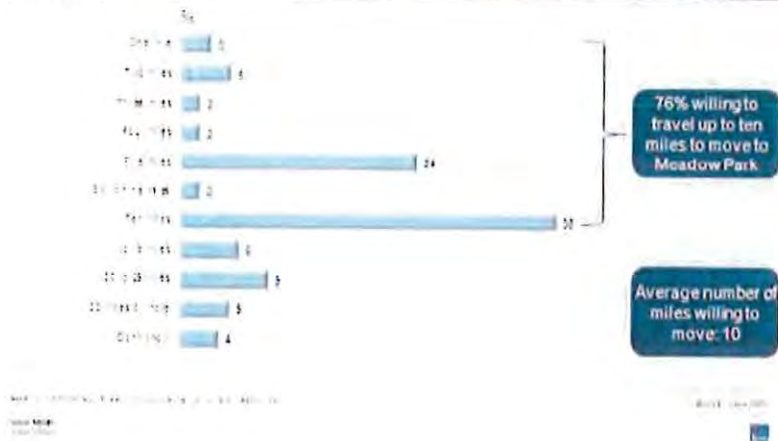
Having seen all of the information about the development, to what extent would you be likely to move to Meadow Park?



Of those who would be willing to move to Meadow Park, 36% would be prepared to move up to five miles, with an additional 40% saying they would move up to ten miles to live in the development. The average distance that those likely to sell up and live in Meadow Park would move is 10 miles. Given that many over 55s within the catchment area tend to live among family and friends and are close to the places they socialise, it is understandable that few would be prepared to move further away.

Distance over 55s would be willing to move to Meadow Park

What would be the maximum distance, in miles, you would be willing to move from your current home to Meadow Park?



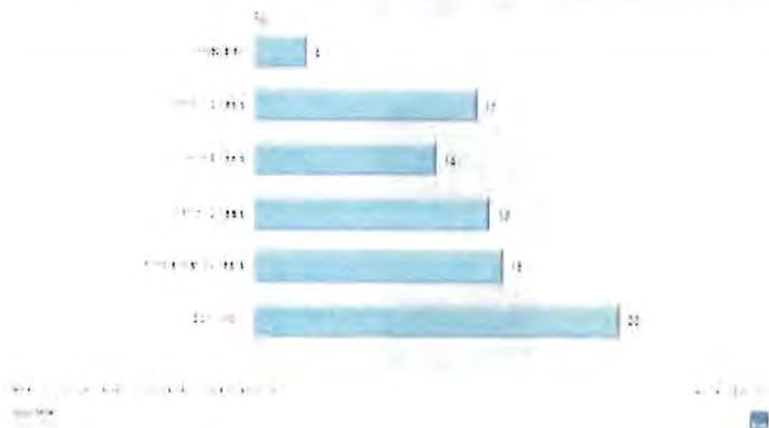
Indeed, all who socialise at friends' homes, church/place of worship, church groups, bars and local community groups say that it would still be important to them that they could continue with these activities if they were to move to Meadow Park. Therefore, it is essential that people are within a suitable distance to travel to these settings.

Even among those who were unsure as to whether they would move to Meadow Park, 71% said the maximum distance they would be willing to move would be ten miles.

Of the over 55s who would be likely to live in Meadow Park, over a third (35%) would consider moving there within the next five years. An additional 18% would think about moving to the development within the next ten years.

Timeline for moving to Meadow Park for over 55s

At what stage would you be likely to consider moving into Meadow Park?



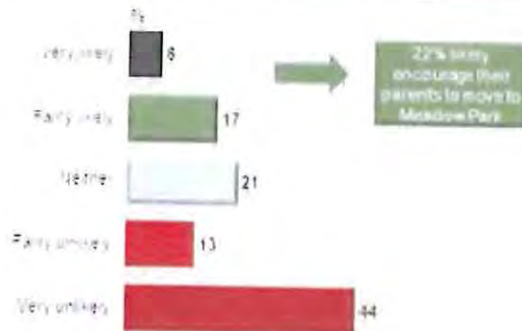
For some, they are currently thinking about downsizing or are suffering ill health, so they feel that they would consider a development such as Meadow Park in the near future. Meanwhile, other over 55s surveyed are not yet at the stage that they feel they need to think about a retirement village, but would be more likely to consider it if they were struggling with their current home.

In terms of selling their current property, nearly two thirds (64%) of those who would be likely to move to Meadow Park would be more inclined to sell their home privately, rather than sell their residence to Meadow Park (20%).

With regard to 40-54s, just under a quarter (22%) would encourage their parents to consider moving to Meadow Park, with 6% very likely to do so. However, 57% would be unlikely to urge their parents to the development, with 44% saying they would be very unlikely to do so. Furthermore, half (51%) of those who would not encourage their parents to move to Meadow Park are unlikely to change their mind.

Likelihood to move to Meadow Park among 40-54s

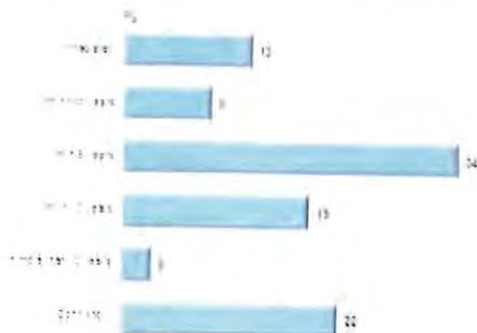
Having seen all of the information about the development, to what extent would you be likely to encourage your parents to move to Meadow Park?



Among those who would encourage their parents to move to Meadow Park, over half (56%) would urge them to do so in the next five years, mainly due to the parent's current or potential health or their age.

Timeline for moving to Meadow Park for 40-54s

At what stage would you begin encouraging your parents to consider moving into Meadow Park?



For those who would be unwilling to encourage their parents to move to Meadow Park, the over-riding reason is that one or both parents are happy living in their current home (83%). Other reasons cited include that parents would not want to move out of their immediate area (34%) and the concept of Meadow Park would not appeal to either their mother or father (27%).

According to 40-54s, their parents would be more inclined to sell their home privately rather than sell the property to Meadow Park (50% versus 8% respectively).

Appendices

A6. What is your parent's occupation(s)?
 ASK FOR HOUSEHOLD REFERENCE
 PERSON
 IF RETIRED TAKE OCCUPATION BEFORE
 THEY RETIRED
 STATE EXACT AND CODE

A	1	CONTINUE
B	2	
C1	3	
C2	4	
D	5	THANK AND CLOSE
E	6	

ALL PARTICIPANTS MUST BE AGED 40 OR OVER, ABC1C2 AND AN
 OWNER OCCUPER

THOSE AGED 55 AND OVER SHOULD ONLY ANSWER THE QUESTIONS IN
 SECTION 1

THOSE AGED 40-54 SHOULD ONLY ANSWER THE QUESTIONS IN SECTION
 2.

INTERVIEWER INSTURCTION: Thank participant and check that they
 are still happy to be interviewed.

ONLY ASK Q1-Q3b FOR THOSE AGED 55 AND OVER

To start off with I'd like to ask you a few questions about family.

Q1. Do you have any children?

1. Yes
2. No

Q2. Do you have any grandchildren?

1. Yes
2. No

IF Q1 = 1 ASK Q3a

Q3a. Do your children live within five miles of your home?

1. Yes
2. No

IF Q2 = 1 ASK Q3b

Q3b. Do your grandchildren live within five miles of your home?

1. Yes
2. No

ASK ALL

SHOWCARD 12

INTERVIEWER READ OUT: Retirement villages are for people aged 55 and over. They offer housing in a secure development, often with gates and/or restricted access. Residents have their own front door, a range of facilities and social activities alongside a range of care and support services that can cater for a person's health and care needs as they get older.

Q12. To what extent does this sound appealing to you?

1. Very appealing
2. Fairly appealing
3. Not very appealing
4. Not at all appealing
5. Don't know

MEADOW PARK RETIREMENT VILLAGE

INTERVIEWER INSTRUCTION: READ OUT DESCRIPTION AND SHOW VISUALS TO EXPLAIN WHAT MEADOW PARK IS, HOW IT OPERATES AND THE FACILITIES THAT WOULD BE ON OFFER TO RESIDENTS

Q13. Having heard all the information about Meadow Park, what aspects immediately appeal to you?

- Nothing at all -> Go to Q14

Q14. What would be the must-haves?

Q15. Having heard all the information about this development, what would be the benefits of living in Meadow Park, in your opinion? PROBE TO PRECODES

1. It has all the facilities I would need
2. It is close to where I currently live
3. I know that as I get older there would be people who would care for me
4. It is a real community
5. Having company around me
6. Other (specify)
7. None of these

SHOWCARD 16

Q16. As you have heard the retirement village will offer a range of facilities, which of these facilities would be most important to you? You may select a maximum of five. Please start with the most important facility and list in descending order of importance.

1	60 foot indoor swimming pool	9	Dentist
2	Spa/sauna and fitness suite	10	Bowling green
3	Restaurant and bar	11	Putting green
4	Pharmacy	12	Tennis courts
5	Hair and beauty salon	13	Transport provided for social outing
6	Deli	14	Transport provided to place of worship
7	Newsagents	15	Don't know
8	GP surgery	16	None / No more

Q18. Would you expect to pay a service or maintenance charge for upkeep of the village?

1. Yes
2. No
3. Don't know

READ OUT

As part of the retirement village, you would be able to avail of a range of care packages when required. We would like to get a sense of how important each of the following would be to you.

SHOWCARD 19

Q19. How important is it that supported living would be available at Meadow Park?

1. Very important
2. Fairly important
3. Not very important
4. Not at all important

SHOWCARD 19 AGAIN

Q20. How important is it that 24 hour care would be available at Meadow Park?

1. Very important
2. Fairly important
3. Not very important
4. Not at all important

Q21. In order to move to Meadow Park you would be required to sell your home. You could do so privately and buy a home in Meadow Park or you could sell your current home to the owners of Meadow Park and move in. If selling to Meadow Park, you would be given fair market value. Which of those options would you be more likely to proceed with:

1. Sell current home privately

2. Sell current home to Meadow Park
3. Neither

FRIENDS AND HOBBIES

Now I would like to ask you a few questions about your friends.

Q22 Can I ask where the majority of your closest friends live?

--

Q23 Do you tend to socialise within your local area?

1. Yes
2. No Go to Q25

Q24 What types of places do you tend to socialise within your local area?

1. Local community groups
2. Church
3. Church groups
4. Bars / clubs
5. Bingo
6. Friend's home
7. Sports clubs/venues
8. Other (specify)

SHOWCARD 19 AGAIN

Q25 How important is it that you live close i.e., within 10 miles of your family or friends? Please answer on a scale of 1-4, where 1 is not at all important and 4 is very important.

1. Very important
2. Fairly important
3. Not very important
4. Not at all important
5. Don't know/unsure

Q26 What would be the maximum distance, in miles, you would be willing to move from your current home to live in Meadow Park?

RECORD NUMBER OF MILES SPECIFIED

		-98 = Don't know
--	--	------------------

SHOWCARD 19 AGAIN

- Q27 How important would it be that you could still attend <insert place where people socialise> if you were to move to Meadow Park? Please answer on a scale of 1-4, where 1 is not at all important and 4 is very important.
1. Very important
 2. Fairly important
 3. Not very important
 4. Not at all important
 5. Don't know/unsure

LIKELIHOOD TO MOVE INTO MEADOW PARK**SHOWCARD 28**

- Q28 Having seen all of the information about the development, to what extent would you be likely to move to Meadow Park?
1. Very likely
 2. Fairly likely
 3. Neither
 4. Fairly unlikely
 5. Very unlikely

IF Q28 = 1 OR 2 ASK Q29, OTHERS GO TO Q31

SHOWCARD 29

- Q29 At what stage would you be likely to consider moving into Meadow Park?
1. Immediately
 2. Within two years
 3. Within 5 years
 4. Within 10 years
 5. In more than 10 years
 6. Don't know

- Q30 Why do you say this?

IF Q28 = 4 OR 5 ASK Q31, OTHERS GO TO BACKGROUND QUESTIONS

- Q31 Why would you be unlikely to consider moving to Meadow Park? DO NOT PROMPT
1. I am happy living in my current house
 2. I do not want to move out of my current area
 3. The concept of Meadow Park does not appeal to me
 4. I have other plans
 5. Other (specify)

- Q32 How would your circumstances have to change for you to consider moving to this Meadow Park?

FOR THOSE ANSWERING ABOUT A PARENT/ PARENTS

THIS SECTION SHOULD ONLY BE ANSWERED BY ANY PARTICIPANT AGED 40 TO 54 WHOSE PARENTS ARE STILL ALIVE AND AT LEAST ONE OWNS THEIR HOME- A1 (6-8) AND A4 (1-3) AND (A5c (1-2) OR A5d (1-2))

Wording changes based on question A4.

Version (A) – if A4 = 1, Version (B) – if A4 = 2, Version (C) – if A4 = 3

Q33. From your knowledge,

- (A) have your parents considered their future, in terms of where they may live or the care they may need as they get older?
 - (B) has your father considered his future, in terms of where he may live or the care he may need as he gets older?
 - (C) has your mother considered her future, in terms of where she may live or the care she may need as she gets older?
1. Yes
 2. No
 3. Don't know

IF Q33 = 1 ASK Q34, OTHERS GO TO Q35

Q34. What [(A) have they (B) has he (C) has she] thought about?
DO NOT PROMPT

- Q35. (A) From your knowledge, have they made any plans for their future, in terms of where they may live or the care they may need as they get older?
- (B) From your knowledge, has he made any plans for his future, in terms of where he may live or the care he may need as he gets older?
- (C) From your knowledge, has she made any plans for her future, in terms of where she may live or the care she may need as she gets older?
1. Yes
 2. No
 3. Don't know

IF Q35 = 1 ASK Q36, OTHERS GO TO Q37

Q36. What specific plans [(A) have they (B) has he (C) has she] made?
DO NOT PROMPT

PERCEPTIONS OF RETIREMENT VILLAGES

ASK ALL

Q37. Have you ever heard of the term 'retirement village'?

1. Yes
2. No

IF Q37 = 1 ASK Q38, OTHERS GO TO Q40

Q38. What do you know about retirement villages? DO NOT PROMPT RECORD VERBATIM

Q39. What would you expect a retirement village to offer? DO NOT PROMPT

1. Sheltered housing
2. Around the clock care
3. A large number of facilities
4. A variety of activities for older people
5. Other (please specify)

ASK ALL

SHOWCARD 40

INTERVIEWER READ OUT: Retirement villages are for people aged 55 and over. They offer housing in a secure development, often with gates and/or restricted access. Residents have their own front door, a range of facilities and social activities alongside a range of care and support services that can cater for a person's health and care needs as they get older.

Q40. To what extent does this sound appealing to you?

1. Very appealing
2. Fairly appealing
3. Not very appealing
4. Not at all appealing
5. Don't know

MEADOW PARK RETIREMENT VILLAGE

INTERVIEWER INSTRUCTION: READ OUT DESCRIPTION AND SHOW VISUALS TO EXPLAIN WHAT MEADOW PARK IS, HOW IT OPERATES AND THE FACILITIES THAT WOULD BE ON OFFER TO RESIDENTS.

Q41. Having heard all the information about Meadow Park, what aspects do you think would appeal to your [(A) parents (B) father (C) mother]?

- Nothing at all -> Go to Q43

Q42. Having heard all the information about this development, what would be the benefits to your [(A) parents (B) father (C) mother] of living in Meadow Park?

PROBE TO PRECODES

1. It has all the facilities they would need
2. It is close to where they currently live
3. I know that as they get older there would be people who would help them
4. It is a real community
5. Having company around them
6. Would give me peace of mind that they are safe
7. Would take pressure off me being a carer
8. Other (specify)
9. None of these

SHOWCARD 43

Q43. As you have heard the retirement village will offer a range of facilities, which of these facilities would be most important to your [(A) parents (B) father (C) mother]? You may select a maximum of five. Please start with the most important facility and list in descending order of importance.

1	60 foot indoor swimming pool	9	Dentist
2	Spa/sauna and fitness suite	10	Bowling green
3	Restaurant and bar	11	Putting green
4	Pharmacy	12	Tennis courts
5	Hair and beauty salon	13	Transport provided for social outing
6	Deli	14	Transport provided to place of worship
7	Newsagents	15	Don't know
8	GP surgery	16	None / No more

Q45. Do you think your [(A) parents (B) father (C) mother] would expect to pay a service or maintenance charge for the upkeep of the village?

1. Yes
2. No
3. Don't know

READ OUT

As part of the retirement village, your parent/parents would be able to avail of a range of care packages when required. We would like to get a sense of how important you think each of the following would be to them.

SHOWCARD 46

Q46. How important is it that supported living would be available at Meadow Park for your [(A) parents (B) father (C) mother]?

1. Very important
2. Fairly important
3. Not very important
4. Not at all important

their (B) his (C) her] family or friends? Please answer on a scale of 1-4, where 1 is not at all important and 4 is very important.

1. Very important
2. Fairly important
3. Not very important
4. Not at all important
5. Don't know/unsure

- Q53 What would be the maximum distance, in miles, your [(A) parents (B) father (C) mother] would be willing to move from [(A) their (B) his (C) her] current home to live in Meadow Park?
RECORD NUMBER OF MILES SPECIFIED

		98 = Don't know
--	--	-----------------

SHOWCARD 46 AGAIN

- Q54 How important do think it would be to your [(A) parents (B) father (C) mother] that [(A) they (B) he (C) she] could still attend <insert place where people socialise> if [(A) they were (B) he was (C) she was] to move to Meadow Park? Please answer on a scale of 1-4, where 1 is not at all important and 4 is very important.
1. Very important
 2. Fairly important
 3. Not very important
 4. Not at all important
 5. Don't know/unsure

LIKELIHOOD TO MOVE INTO MEADOW PARK

SHOWCARD 55

- Q55 Having seen all of the information about the development, to what extent would you be likely to encourage your [(A) parents (B) father (C) mother] to move to Meadow Park?
1. Very likely
 2. Fairly likely
 3. Neither
 4. Fairly unlikely
 5. Very unlikely

IF Q55 = 1 OR 2 ASK Q56. OTHERS GO TO Q58.

SHOWCARD 56

- Q56 At what stage would you begin encouraging your [(A) parents (B) father (C) mother] to move to Meadow Park?
1. Immediately
 2. Within two years
 3. Within 5 years
 4. Within 10 years
 5. In more than 10 years
 6. Don't know

- Q57 Why do you say this?

--

IF Q55 = 4 OR 5 ASK Q58, OTHERS GO TO BACKGROUND QUESTIONS

Q58 Why would you be unlikely to encourage your [(A) parents (B) father (C) mother] to move to Meadow Park?

1. They are happy living in their current house
2. They do not want to move out of their current area
3. The concept of Meadow Park would not appeal to them
4. I do not like the concept personally, so would not encourage my parent to move there
5. They have other plans
6. Other (specify)

Q59 How would your [(A) parents' (B) father's (C) mother's] circumstances have to change for you to encourage [(A) them (B) him (C) her] to move to Meadow Park?

BACKGROUND QUESTIONS

Record gender of respondent

1. Male
2. Female

THANK AND CLOSE

I am now going to show you plans for a proposed development nearby and give you some detail on what the development will entail. After I will ask a series of questions on your thoughts and feelings on the development. It is important that I re-iterate that we are not trying to sell you anything and you will not be passing any expressions of interest in the development to our client.

Meadow Park Retirement Village is a proposed development on a 30 acre site in the Castlereagh countryside, bounded by the Ballygowan and Church Roads.

The concept for the development is a Retirement Village. A Retirement Village provides a combination of high quality accommodation and leisure, social and health amenities. It also provides services designed to enhance the quality of life and options for people who require some support as well as those who want to plan ahead for the future.

The map I am going to show you, shows the layout of the site and provides an outline of the proposed housing and facilities.

If you look at the centre of the map, you will see the courtyard community buildings, which would form the hub of this retirement village. These buildings will house a broad range of facilities including comprehensive fitness and exercise options such as a 60 foot indoor swimming pool, spa, bowling green, tennis courts and putting green. In addition to this, they would offer extensive health care facilities including a medical centre housing a GP surgery, physiotherapist and a dentist.

A number of retail units would be created, as well as a restaurant and coffee lounge. Function rooms for dance, arts and crafts and a multi-purpose sports hall would also be on-site.

Around the village centre amenities, you will see a wide variety of housing. In total, the village will contain 210 dwellings with a mix of own-door apartments, and semi-detached and detached housing. To the top of the map, you can see example of the style of houses planned for the development and on the right hand side of the map, you can see images of how the own-door apartments may look.

At the entrance to the site on the Ballygowan Road, there are plans for on-site security buildings to monitor the movements of visitors to the

village. CCTV will be installed and would be monitored around the clock as safety and security within the retirement community is of paramount importance.

Moving to the bottom of the map, there are plans for an on-site wellness spa, which would be home to a sauna and fitness suite.

As you come to the left hand side of the map you will see images of a Care Centre that is proposed for the village. The care centre will act as an on-site nursing home, which residents may move to at the point they become unable to care for themselves. The Care Centre would contain a number of assisted living suites, skilled care beds and guest suites. Other amenities within the building includes a coffee shop, games room, library, lounges and a cinema room.

In terms of care, a number of optional services will be offered to residents including:

- Optional levels of assistance are available from a purpose built care centre to suit individual needs.
- Optional support services, laundry services, personal shopping, domestic cleaning, personal care or even chef's menu delivery services.

Behind the care centre and running alongside the Church Road, you can see plans for a landscaped garden with pond and reserved space for a number of allotments. As you can see on the map, there are plans for a variety of different walking routes/trails throughout the development and plenty of gardens and shrubbery to enhance the look and feel of the community.

External maintenance and repairs can be included in monthly service and maintenance charges.

In order to move to Meadow Park you would be required to sell your home. You could do so privately and buy a home in Meadow Park or you could sell your current home to the owners of Meadow Park and move in. If selling to Meadow Park, you would be given fair market value.

Essentially, the aim of the development is to provide a diverse community of like-minded people sharing, interest, leisure activities with as much or as little social interaction as you want.

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