

## **Report to Shevington Parish Council Policy and General Purposes Committee - October 5<sup>th</sup> 2017**

### **Dementia and Planning in Shevington**

Earlier this year The Royal Town Planning Institute produced a Guidance Note on Dementia and Planning. The full text can be found at [http://rtpi.org.uk/media/2213533/dementia\\_and\\_town\\_planning\\_final.compressed.pdf](http://rtpi.org.uk/media/2213533/dementia_and_town_planning_final.compressed.pdf) This report summarizes the points made in this note and links it to initiatives taken by the Community Association over the last two years.

There are currently 850,000 people living with dementia in the UK. This is set to increase to 1million by 2021 and to 2 million by 2051. Evidence has shown that good quality housing and well planned local environments can have a substantial impact on the quality of life of someone living with dementia, helping them to live well for longer. If you get an area right for people with dementia, you get it right for older people, for young disabled people, for families with small children, and ultimately for everyone.

#### **What is dementia?**

Dementia refers to a set of symptoms that may include memory loss and difficulties with thinking, problem solving or language. However a person living with dementia may also experience changes in their mood or behaviour. Dementia can also exacerbate the effects of physical impairments and sensory challenges of the disease are becoming more understood. Dementia is an umbrella term and is caused when the brain is damaged by diseases, such as Alzheimer's or a series of strokes. All types of dementia are progressive and each person will experience dementia in their own way. Whilst dementia is most common in older people, some people experience young-onset dementia.

#### **Where does dementia occur?**

The areas with the highest rates of dementia tend to be those with a high proportion of older people.. However, a House of Commons Library briefing has calculated an age-standardised prevalence for all parliamentary constituencies (if each constituency had an age structure in line with the English average) which shows higher rates of diagnosis in some urban areas of North West England than in other parts of the country. Two-thirds of people who have dementia are women

#### **Dementia Friendly Communities**

In 2013 Alzheimer's Society and Dementia Action Alliance launched a recognition process which enables communities to be publicly acknowledged for their work towards becoming dementia friendly, by ensuring the right local structure is in place, focusing plans on a number of locally identified areas and developing a strong voice for people with dementia. Ten characteristics of a dementia friendly community were identified. They include: shaping communities around the views of people with dementia and their carers, appropriate transport, and easy to navigate physical environments. The scheme has demonstrated that small changes can make a big difference. There are currently over 215 registered communities working to become

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dementia friendly one of which includes Shevington .

The Shevington Dementia Friendly Network has now been in existence for over two years. It has been successful in promoting and delivering awareness sessions in the community as well as to businesses and the high school. The Network has been successful in bringing people together and sharing information.. It will continue to respond to requests for awareness sessions.

### Improving the local environment

Planners have a significant impact on the accessibility of the built environment for people living with dementia through their role in the design and maintenance of public spaces and in the decisions and policies they make for an area. They should involve people with dementia on advising on new developments.

### Urban design

Good urban design is essential for improving the ability of people living with dementia to live well:

- **Familiar environment** - functions of places and buildings are obvious, any changes are small scale and incremental;
- **Legible environment** - a hierarchy of street types, which are short and fairly narrow. Clear signs at decision points;
- **Distinctive environment** - a variety of landmarks, with architectural features in a variety of styles and materials. There is a variety of practical features, e.g. trees and street furniture;
- **Accessible environment** - land uses are mixed with shops and services within a 5-10 minute walk from housing. Entrances to places are obvious and easy to use and conform to disabled access regulations;
- **Comfortable environment** - open space is well defined with toilets, seating, shelter and good lighting. Background and traffic noise should be minimised through planting and fencing. Street clutter is minimal to not impede walking or distract attention;
- **Safe environment** - footpaths are wide, flat and non-slip, development is orientated to avoid creating dark shadows or bright glare.

### Housing design

Good, carefully considered design is even more important inside the home, whether this is a family home, extra care housing, residential care or nursing care. Often small changes can be enough to help someone living with dementia to be more independent by providing an environment that is clearly defined, easy to navigate, and feels safe. Whilst the internal layout of buildings is usually beyond the scope of the role of planners, it is still worth being aware of the key principles of good design, which include:

- **Safe environment** – avoid trip hazards, provide handrails and good lighting;
- **Visual clues** – clear signage, sight lines and routes around the building; Clearly defined rooms – so the activities that take place there can be easily understood;
- **Interior design** – avoid reflective surfaces and confusing patterns. Use age and culturally appropriate designs;
- **Noise** – reduce noise through location of activities and soundproofing.

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Provide quiet areas as people with dementia can be hyper-sensitive to noise;

- **Natural light or stronger artificial light** – many people with dementia have visual impairment or problems interpreting what they see;
- **Outside space** – access to safe outside space, with good views from inside the building as daily exposure to daylight improves health.

### **Planning and health policy**

The National Planning Policy Framework (NPPF) in England recognises that the “planning system can play an important role in facilitating social interaction and creating healthy, inclusive communities” . It also states, “local planning authorities should plan for a mix of housing based on current and future demographic trends, market trends and the needs of different groups in the community” . The supporting National Planning Policy Guidance (NPPG) goes on to say, “the need to provide housing for older people is critical given the projected increase in the households aged 65 and over .... Plan makers will need to consider the size, location and quality of dwellings needed in the future for older people” . The Health and Social Care Act (2012) required the creation of Health and Wellbeing Boards to plan how to best meet the needs of the local population. Local public health services are now commissioned by local authorities, giving greater opportunity for integration across different departments.

### **Local authority policy**

Many local authorities now make provision for healthy living and liveability, however in adopted plans there is so far little specific mention of dementia.

### **Partnership working**

Integrated and effective partnerships need to be developed with care and service providers including social care; housing providers; health and well-being boards; NHS Trusts; and public health authorities. Health and well-being boards are responsible for encouraging integrated working on health and wellbeing issues, including the development of Joint Health and Wellbeing Strategies (JHWS), and Joint Strategic Needs Assessments (JSNA). The Planning Advisory Service (PAS) recommends that local authorities identify a single point of contact for older people’s housing. One new approach is the ‘Healthy New Towns’<sup>38</sup> initiative, where the NHS in England is working with ten housing developments to rethink how health and care services can be delivered and the health of communities can be improved through the built environment

### **Conclusions.**

That it is noted how planning can contribute to the delivery of a dementia friendly environment and to congratulate the Community Association on their work towards making Shevington a Dementia Friendly Community.

Barry King

September 30<sup>th</sup> 2017