



Solihull MBC Local Plan Publication Stage Representation Form

Ref:

(For official use only)

Name of the Local Plan to which this representation relates:

Please return to psp@solihull.gov.uk or Policy and Engagement, Solihull MBC, Solihull, B91 3 BY Monday 14th December 23:59

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This form has two parts –

Part A – Personal Details: need only be completed once.

Part B – Your representation(s). Please fill in a separate sheet for each representation you wish to make.

Part A

1. Personal Details*

2. Agent's Details (if applicable)

**If an agent is appointed, please complete only the Title, Name and Organisation (if applicable) boxes below but complete the full contact details of the agent in 2.*

Title	<input style="width: 90%;" type="text"/>
First Name	<input style="width: 90%;" type="text"/>
Last Name	<input style="width: 90%;" type="text"/>
Job Title (where relevant)	<input style="width: 90%;" type="text"/>
Organisation (where relevant)	McCarthy and Stone Retirement Lifestyles Ltd
Address Line 1	100A Holdenhurst Road
Line 2	Bournemouth
Line 3	<input style="width: 90%;" type="text"/>
Line 4	<input style="width: 90%;" type="text"/>
Post Code	BH8 8AQ
Telephone Number	As agent
E-mail Address (where relevant)	As agent

Mr
Alex
Child
Planner
The Planning Bureau Ltd
100A Holdenhurst Road
Bournemouth
<input style="width: 90%;" type="text"/>
<input style="width: 90%;" type="text"/>
BH8 8AQ
<input style="width: 90%; background-color: black;" type="text"/>
<input style="width: 90%; background-color: black;" type="text"/>

Part B – Please use a separate sheet for each representation

Name or Organisation:

3. To which part of the Local Plan does this representation relate?

Paragraph Policy Policies Map

4. Do you consider the Local Plan is :

4.(1) Legally compliant	Yes	<input type="text" value="/"/>	No	<input type="text"/>
4.(2) Sound	Yes	<input type="text"/>	No	<input type="text" value="/"/>
4 (3) Complies with the Duty to co-operate	Yes	<input type="text" value="/"/>	No	<input type="text"/>

Please tick as appropriate

5. Please give details of why you consider the Local Plan is not legally compliant or is unsound or fails to comply with the duty to co-operate. Please be as precise as possible.

If you wish to support the legal compliance or soundness of the Local Plan or its compliance with the duty to co-operate, please also use this box to set out your comments.

Paragraph 214 states *“Specialist housing will provide fully self-contained homes to people who may need care at the time that they take up occupation, or may develop a need for care over a period”* and then goes on to consider how the Council defines such housing referring to levels of care that would be typically found in extra care accommodation. This fails to recognise that there are a wide range of housing types for older people in response to a wide range of varying needs. PPG guidance *“housing for older and disabled people”* at para 10 states that this extends from simple age restricted accommodation and retirement housing with little or no care, through to care and nursing homes. The benefits of all forms of such accommodation are well recognised and the HEDNA generally recognises a need for many forms of such housing. The paragraph in seeking to define older persons housing therefore takes a far too narrow approach .

(Continue on a separate sheet /expand box if necessary)

6. Please set out the modification(s) you consider necessary to make the Local Plan legally compliant and sound, in respect of any legal compliance or soundness matters you have identified at 5 above. (Please note that non-compliance with the duty to co-operate is incapable of modification at examination). You will need to say why each modification will make the Local Plan legally compliant or sound. It will be helpful if you are able to put forward your suggested revised wording of any policy or text. Please be as precise as possible.

That Para 214 be amended wholesale to recognise the wide range of specialised housing for older people, that this is not just restricted to housing “with care” and that all forms of such housing brings with it a range of benefits not least in addressing loneliness, isolation and assisting downsizing

(Continue on a separate sheet /expand box if necessary)

Please note In your representation you should provide succinctly all the evidence and supporting information necessary to support your representation and your suggested modification(s). You should not assume that you will have a further opportunity to make submissions.

After this stage, further submissions may only be made if invited by the Inspector, based on the matters and issues he or she identifies for examination.

7. If your representation is seeking a modification to the plan, do you consider it necessary to participate in examination hearing session(s)?

No, I do not wish to participate in hearing session(s)

Yes, I wish to participate in hearing session(s)

Please note that while this will provide an initial indication of your wish to participate in hearing session(s), you may be asked at a later point to confirm your request to participate.

8. If you wish to participate in the hearing session(s), please outline why you consider this to be necessary:

Please note the Inspector will determine the most appropriate procedure to adopt to hear those who have indicated that they wish to participate in hearing session(s). You may be asked to confirm your wish to participate when the Inspector has identified the matters and issues for examination.

9. Signature:

A J Child

Date:

14/12/2020