

# **Designing Dementia-friendly Neighbourhoods**

## **Supplementary Planning Document**

**April 2022**

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## **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 other health conditions. There are also sensory challenges, including vision, hearing, perception and balance, along with taste and smell that many people living with dementia experience. 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.

## **Background**

There are currently around 900,000 people living with dementia in the UK. This is projected to rise to 1.6 million by 2040. Two-thirds of older people living with dementia in the UK live at home, around a quarter alone. In Milton Keynes there are currently 1647 people living with dementia and this is predicted to rise to 4300 by 2030. The current cost of dementia care in Milton Keynes is £113 million and this will rise to £213 million by 2025.

The number of older people in the UK is rising dramatically, particularly in the age group of 85 years and above. As the likelihood of developing dementia increases with age, reaching a one in five chance over the age of 80, the number of people living with dementia in the UK is also growing.

It is vital that people living with dementia stay as active as they can - physically, mentally and socially. People living with dementia need meaningful activities they enjoy, which can maintain their confidence. Research has shown that remaining in the familiar surroundings of home and the local neighbourhood can have beneficial effects cognitively, physically and emotionally. People living with dementia who want to remain in their homes should be supported to do so for as long as possible.

However, to live successfully in the community people with dementia need outdoor environments that are designed to help rather than hinder. If they are unable to enter or use their local neighbourhoods, they will become effectively housebound. Despite fears that people living with dementia will come to harm or lose the way, getting outdoors is important for their health and well-being.

The Council Plan includes a commitment to make Milton Keynes a dementia-friendly city. This Supplementary Planning Document (SPD) will help to meet that commitment by ensuring that new residential developments are designed to be dementia friendly. The SPD provides design guidance aimed at creating neighbourhoods that will help to maintain the wellbeing and independence of people living with dementia.

Designing for people living with dementia has wider benefits – if you get the place right for people living with dementia, then it will work for older people, for young disabled people, for families with small children, and ultimately for everyone.

## **Planning Policy Context**

National policy, in the National Planning Policy Framework (NPPF), and local policy in Plan:MK emphasizes the need to create healthy places. Paragraph 92 of the NPPF states “Planning policies and decisions should aim to achieve healthy, inclusive and safe places which: a) promote social interaction...; b) are safe and accessible...; c) enable and support healthy lifestyles”.

Plan:MK includes a number of policies that are relevant including Policy EH7 (Promoting Healthy Communities), Policy SD1 (Place-making Principles for Development) and Policy D1 (Designing a High Quality Place).

The Strategy for 2050 [www.mkfutures2050.com](http://www.mkfutures2050.com) sets out the Council’s long-term ambitions for Milton Keynes. It states that we “need our homes and communities to be designed to help to meet our ambition to be a Dementia Friendly City” (page 35). The Strategy further states that “The diversity of neighbourhoods is made richer by homes and buildings that work for people at all stages of their life. This will mean that even if our health, mobility or cognitive functions decline, we can stay as part of our community. Designing dementia-friendly places in which streets are safe and easy to navigate and building to Lifetime Homes standards should be the norm.” (page 65)

The Designing Dementia-friendly Neighbourhoods SPD is aimed at developers involved in submitting planning applications as well as those involved in the determination of planning applications. Once adopted, it will become a material consideration in the determination of planning applications.

## **Principles of Dementia-friendly Design**

The built and natural environment has an important role to play in maintaining the wellbeing and independence of people living with dementia, enabling them to live well for longer. This can be outlined in some simple design principles that can be applied to a large number of settings - urban or rural, new development or existing settlements. These

principles are based on 'Designing dementia-friendly outdoor environments' by Oxford Brookes University.

### **Familiarity**

Familiar surroundings enable people to recognise and understand their surroundings, which helps to prevent and alleviate spatial disorientation and confusion and to aid short-term memory

### **Legibility**

People can understand where they are and identify which way they need to go, helping to prevent and alleviate spatial disorientation, confusion and anxiety

### **Distinctiveness**

People's attention and concentration are captured by the distinctiveness of the various parts of the neighbourhood, which aids orientation and wayfinding

### **Accessibility**

People are able to reach, enter, use and move around the places and spaces they need or wish to visit, regardless of any physical, sensory or cognitive impairment

### **Comfort**

People feel at ease and are able to visit, use and enjoy places and spaces of their choice without physical or psychological discomfort

### **Safety**

People are able to use, enjoy and move around the neighbourhood without fear of coming to harm

## **Features of Dementia-friendly Design**

### **Accessibility to Facilities**

Careful consideration should be given to the location of housing for older people; whether this is mainstream housing, bungalows, step free apartments, sheltered housing, extra care, retirement or residential care homes. Easy access to services and facilities, including public transport, will allow people living with dementia to live well and remain independent for longer. A mix of uses provides the opportunity for people with dementia to interact with other people.

### **Key measures**

- Housing designed for older people, such as sheltered housing or care homes, should be located within a 5-10 minute walk of local shops and services, including public transport.
- For all other housing, services and facilities, including public transport, should be

within 10-20 minutes walking distance (500-800m) of home.

- A mix of uses should be provided within all significant new housing developments.

## **Layout**

People living with dementia may have reduced spatial awareness and less capacity for sense of direction. Therefore, design the strongest visual cues to indicate direction.

### **Key measures**

- Provide a hierarchy of distinguishable street types, including quiet side roads as alternative routes away from crowds/traffic.
- Blocks should be small and laid out on an irregular grid based on an adapted perimeter block pattern. Streets should be short and not too wide.
- Streets should be well connected and gently winding with open ended bends to enable visual continuity.
- Forked and t-junctions are more common than crossroads.
- Visual cues, such as landmark buildings or features, are positioned at decision points, such as junctions and turnings.
- Take care using shared surfaces – a 'safe-zone' with defined edges is needed.

## **Open Space**

Access to green space and to nature has been shown to have particular benefits for people with dementia, including better mood, memory and communication and improved concentration.

### **Key measures**

- Sensory gardens of different kinds are increasingly popular and can provide many benefits to people with dementia.
- People with dementia tend to feel more comfortable in informal places, such as streets, parks and small open spaces with plenty of activity. Formal places, such as large public squares with imposing buildings and an expanse of empty space can feel rather intimidating.
- Provide waymarked circular routes, using public art and colour-coded simple signage.
- Walking routes should be well marked, with signs and/or different waymarkers used where appropriate. Routes of different lengths should be provided and it is helpful to mark the length of routes; preferably in the time it takes to walk as well as the distance.
- For paths to be accessible it is important to make sure they are well defined and that there is clear contrast with the surroundings. Entrances to parks should be well marked.
- Avoid 'dead ends', paths should form continuous routes. Wide paths with even surface materials and defined edges, free of obstacles and confusing decision points.

- Routes should guide people past points of interest which can provide opportunities to engage in activities and social interaction, as well as places to stop and rest.

## Wayfinding

Distinctive landmarks enable intuitive movement and help people with dementia navigate their way around a place.

### Key measures

- Include a variety of landmarks including historic and civic buildings, public art, distinctive structures and places of activity.
- Promote sensory distinctiveness using plants with colour and fragrance.
- Colour can be useful for highlighting certain routes or points of interest.
- Long open vistas should be avoided.
- Maintain clear sight lines.

## Building Design

People with dementia often struggle to interpret the cues that signal the use of buildings, or the location of entrances. Housing should be designed to adapt to the changing needs of people with dementia as their condition progresses.

### Key measures

- Entrances to buildings should be clearly visible and obvious.
- The functions of buildings should be obvious.
- Housing should be capable of adapting to the changing needs of residents. Provision should be made for accessible housing in accordance with Policy HN4 of Plan:MK. [www.milton-keynes.gov.uk/planning-andbuilding/plan-mk](http://www.milton-keynes.gov.uk/planning-andbuilding/plan-mk)
- Incorporate HAPPI design principles into proposals (see Further Reading).
- Contrasting door surrounds can assist in identifying the door position.
- Building facades should use a limited palette of materials.
- Reflections in glass screens or balustrades also can be a disturbance.
- On larger developments, character areas should be used to create a familiar environment.

## Pedestrian Environment

Older people with dementia can face a number of physical barriers in the outdoor environment. People with dementia often walk with a slow, unsteady shuffling gait. They cannot always interpret the intentions of other pedestrians. Visually, tonal changes can be confusing or not perceived. Frailty, an unsteady gait and visual impairment mean that level

changes are problematic.

Sensory challenges are common amongst people with dementia, with changes in the way they see, hear or feel. Hypersensitivity to noise is common, as are changes in perception. The outdoor environment with its multitude of sounds, smells and sensations can be overwhelming.

### **Key measures**

- Paths should be wide enough for pedestrians and mobility scooters to pass comfortably.
- Kerbs should contrast in tonal value to avoid creating a trip hazard.
- Pavements should have unobstructed zones wide enough to cater for all users.
- Preventing the footway being interrupted at private driveways by a vehicle crossover with a crossfall extending the entire width of the footway by introducing shorter drops at the kerbside edge.
- Where traffic volumes are low, the footway should be continued unbroken across the mouth of the junction.
- Manhole covers can appear as a hole and should have recessed corners with matching paving infill.
- Unavoidable level changes should have gentle slopes with a maximum gradient of 1 in 20.
- In urban residential areas a separate footway should be provided on the same side of the road alongside provision for cyclists, that could be in the form of a redway or dedicated cycle path.
- Paving is plain, flat, smooth, non-slip and non-reflective in clear colour and textural contrast to walls.
- Steps at changes in level should be avoided as far as possible. Where there are changes in level, there should be a clear choice between steps or ramps. Handrails should be provided.
- On more heavily trafficked streets, noise should be absorbed or masked by trees or water features.
- Consistent surfaces in texture and tone are recommended, avoiding busy patterns.
- Street lighting should be adequate for people with visual impairments.
- Street clutter, such as a plethora of signs, advertising hoardings and bollards should be avoided.
- Pedestrian crossing points should be clear and direct. Avoid complex crossing points which put the pedestrian in the middle of heavy traffic flows.

### **Seating**

Seating provides the opportunity for people to rest and socialise, or to enjoy public spaces and nature.



### **Key measures**

- Seating should be provided at regular intervals along key pedestrian routes. Recommended distance limit without a rest for mobility impaired and wheelchair users is 50-150m (Inclusive Mobility, DfT, 2021).
- Seating should be provided within public spaces.
- Seating is sturdy with arm and back rests and in materials that do not conduct heat or cold.
- There should be plenty of space for a wheelchair next to the bench. Individual seating is easier for people using wheelchairs to use and is also recommended.
- Consider how seating is placed and where (to what) it is facing. Tables are useful, as having a surface to put things down creates possibilities for different kinds of activities. Think about how street furniture stands out from its situated background and make sure there is sufficient colour contrast.
- Seats which are an integral part of street furniture may be confusing. Seats should look like seats.

### **Signage**

People with dementia have trouble navigating their way around a place. Signs should be simple and explicit and located at decision points, such as road crossings and junctions. The Council is preparing a Redway Design Guide which has been designed to accord with Local Transport Note (LTN) 1/20 (Cycle Infrastructure Design). Signage for redways should accord with the Traffic Signs Regulations and General Directions (TSRGD). In the pedestrian environment the following key measures should be considered.

### **Key measures**

- Signs should be minimal, giving simple, essential information at decision points.
- Signs should have large graphics with realistic symbols in clear colour contrast to the background, preferably dark lettering on a light background.
- Directional signs should be on single pointers.
- Signs locating important places and buildings should be perpendicular to the wall.
- Signs should have non-glare lighting and non-reflective coverings.
- Signage should be clearly visible from a wheelchair position. Symbols and pictograms may be included.
- Too many signs on finger posts can confuse.
- Include clearly displayed signage at a lower level, approximately 1.2m above ground level, including dementia-friendly signs and symbols which should be well lit.

## **Implementation of Dementia-friendly Design**

### **Health Impact Assessment**

Milton Keynes Council require that all Use Class C2 dwellings and Use Class C3 residential development in excess of 50 dwellings will be required to prepare a Health Impact Assessment, which will measure the wider impact on healthy living and the demands that are placed upon the capacity of health services and facilities arising from the development. Further guidance on Health Impact Assessments is provided in the Health Impact Assessment Supplementary Planning Document (SPD), which was adopted by the Council in March 2021.

### **Further Reading**

**Inclusive Mobility: A Guide to Best Practice on Access to Pedestrian and Transport Infrastructure (DfT, 2021)**

**Dementia and Town Planning (RTPI, 2020)**

[www.rtpi.org.uk/dementia](http://www.rtpi.org.uk/dementia)

**Dementia and the Outdoors (Paths for All)**

[www.pathsforall.org.uk](http://www.pathsforall.org.uk)

**Design for Dementia Vols 1 & 2 (Halsall Lloyd Partnership, 2015)**

**Neighbourhoods for Life – Designing Dementia-friendly Outdoor Environments (Oxford Brookes University, 2004)**

**Designing Dementia-Friendly Neighbourhoods: Helping People with Dementia to Get Out and About (Warwick University, 2010)**

**HAPPI Housing Our Ageing Population: Panel for Innovation (HCA, 2009)**

Links to these documents can be found on the Council's website (<https://www.milton-keynes.gov.uk/planning-and-building/designing-dementia-friendly-neighbourhoods-spd-further-reading>).

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