mace

INSIGHTS
2019

JOINING THE DOTS

Moving beyond place
to help solve the UK's
inequality problem

Jason Millett
COO for Consultancy

Jason is Chief Operating Officer for Consultancy and a member of the Mace Group Board. He is responsible for Global Property and Infrastructure and is driving Mace's goal to be the UK's leading programme manager by 2022.

With over 30 years' industry experience, Jason leads on some of the UK's most significant projects and the largest global programmes. He was CLM's programme director for the London 2012 Olympic and Paralympic Games, responsible for the delivery of the venues and the commercial closure of the most successful Games ever.

Jason currently oversees many of Mace's largest commissions, including Dubai Expo 2020, the expansion of Heathrow Airport and the transformation of HS2's London Euston Station.

He is a member of the Heathrow Skills Implementation Steering Group, a Fellow of the Chartered Institute of Building, Royal Institute of Chartered Surveyors and Association for Project Management, and he was an advisor to the Mayor of London's Infrastructure Delivery Board.

Paul Kelly
Strategic Advisory Director

Paul leads Mace's Strategic Advisory business, supporting public and private sector clients to convert their business objectives into deliverable programmes with beneficial outcomes.

He has 30 years' experience shaping public-private partnerships, with a focus on urban investment programmes that include the delivery of long-term, positive economic and community impacts.

Paul draws on his background in the sector – which includes time as Group Director for Facilities Management and Commercial Assets at Places for People, as well as senior roles at Bovis Lend Lease and KPMG – to inform his advisory approach.

Paul and his team are supporting several high-profile clients with the planning, development and implementation of improved programmes and services. This includes developing the business case for enhanced public sector assets and services in the North of England, strategic planning for major London development projects and delivering change management programmes for central government.

In **1950**
one-third of the world's population lived in cities

...today half does

Ending the GP 'postcode lottery' would require an additional...

14,000
GPs to be recruited

We need to build...
300,000
new homes a year in the UK to meet demand

Longer-commuting workers are...

33%
more likely to suffer from depression

Household income in left-behind areas is on average...

£7,000
lower [iv]

The UK has a once in a generation opportunity to help close the inequality gap. When many people talk about inequality they only address income, which misses the complexity of the issue.

The Centre for Economic Policy Research found that less than 1% of the variance in life satisfaction is explained by income inequality. Things like life expectancy, job opportunities, quality of healthcare, availability of affordable housing and green spaces all impact satisfaction.

The 2016 Brexit vote was seen by many as a cry for help from areas around the UK, which feel they have been ignored by Westminster and Brussels. With 300,000 new homes needed every year and services reaching breaking point, there's a need and a chance to do things better.

There is increasing pressure on urban areas, with more people living in cities. In 1950, around one third of the world's population lived in cities compared to around half of people today.

We need to look holistically at what drives a place and the interventions that will help it to thrive. This means considering factors like our ageing population, where people work and how they get there, along with how to create 'community capital' (i.e. a stake in society) and a sense of belonging.

It's welcome that the National Design Guide, published by the Ministry of Housing, Communities and Local Government in October 2019, encourages designers to look beyond buildings and think about the purpose of a place and how it meets the needs of its people.

Meeting people's needs influences wellbeing. The workplace has an important role to play in this, but it's not easy to address. We recognise there's no one-size-fits-all solution and, at Mace, we've been working on understanding the drivers of wellbeing in our organisation. Employees with higher wellbeing feel more productive, are less likely to leave and experience less presenteeism. Our internal insights have enabled us to build a meaningful and targeted wellbeing strategy and we're now working with our supply chain and partners to bring them on board and share the benefits.

Our polling[i] shows that the public views healthcare provision as most important when choosing where to live. This, combined with the vast amounts of money spent in the sector, means healthcare is high on the political agenda.

Our research has identified the best and worst areas for GP demand, access, and user experience across England. It finds a 'postcode lottery' where there's a mismatch between the number of GPs and demand for services. Ending this inequality would require a further 14,000 GPs unless targeted placemaking interventions can help reduce demand.

Given the pressure on private developers to play a broader role in society, the duty on the public sector to prepare for the future and the desperate need for more homes, it seems there is a perfect storm, and a need for a better approach.

Jason Millett
COO for Consultancy

Mace has produced this report in recognition of the need to address the inequality seen across the UK's towns and cities.

We review the current situation and the reasons behind the deprivation, before outlining what makes a good place and how placemaking interventions are essential to helping address the challenge.

We go on to offer an overview of the Mace approach to creating good places, supporting this with data taken from the private polling we commissioned for this report.

From this polling, we identified healthcare provision as a primary consideration for the British public and so offer a deep dive into the challenges in this realm.

With the above in mind, we make a series of recommendations that we believe will support improved placemaking in the UK and help tackle inequality.

The current situation

It is widely agreed that the UK has consistently failed to build enough new homes over the last 50 years. This has led to the current situation, where many young people struggle to get on the housing ladder due to a lack of supply and where seven out of ten peopleii pin the blame for the failure on central government. Current estimates suggest that 300,000 new homes need to be delivered every year, which the Government has accepted as an official target.

However, in the clamour to deliver these much needed new homes, the bigger societal picture can be forgotten, along with those who live in the most deprived communities around the country.

In many ways, the Brexit vote was a rejection of the political and economic status quo, which had lost touch with the concerns and life experiences of real people. It was a call from those who felt forgotten for things to change. One of the outcomes of the result of the EU referendum has been the increased focus it has brought to 'left-behind' places around the UK and the acknowledgment that they must not be ignored.
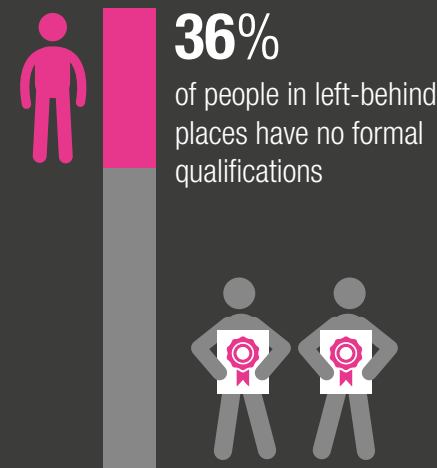
While many cities have generally done well over the last decade, their outskirts and a number of towns around the country have performed much less favourably. The Office for National Statistics reports that around a third of the UK's population lives in the most deprived 10% of places.iii

What's more, research shows that:

- left-behind places, have on average, half a job per working aged person

- household incomes are £7,000 lower than the national average

- nearly one in four people suffer with a long-term illness (a 60% higher rate than those who live in the most affluent areas)

- life expectancy is, on average, 16 years shorter than in more prosperous areas.iv

These statistics are played out in real life in a number of neighbourhoods across the country. Take, for example, The Wirral in the North West of England. The east side of the peninsula is home to Birkenhead and the Cammell Laird shipyard, which employed 40,000 skilled workers in its heyday compared to the west, which is much more residential and affluent. On average, people on the west side have a ten year longer life expectancy than those on the east, when just six miles separates them geographically.v

With this, it's clear that among the wide-ranging and complex issues driving inequality in the UK, where a person lives (their postcode) and what it's like to live there are critical factors. Obtaining a better understanding of these dynamics is vital to understanding how professionals in the built environment can help to tackle the issue in existing places and also ensure that, when creating new places, this challenge is at the forefront of the mind.

36% of people in left-behind places have no formal qualifications

Nearly...

1/4 of people in left-behind areas have a long-term illness iv

1/3 of the population live in the most deprived communities iii

A need for clear leadership

The term 'left-behind places' is, in its very nature, an indication that things could have been done better.

Unquestionably, the specifics vary from place to place but, in many instances, we see the same challenges.

In this section, we consider the causes and what needs to change.

Turning around the fortunes of left-behind places requires leadership. Most often that means public sector leadership, as these communities often receive limited interest from private sector businesses due to a high level of risk and/or a perceived lack of benefit.

With incentivisation, private sector organisations may become more inclined to get involved, but this needs the direction of strong public sector leaders who can bring together the right partners and effectively coordinate them to achieve positive outcomes.

There is currently, and perhaps understandably, an imbalance in the roles played by the public and private sectors when tackling inequality, particularly in our left behind towns. A more coherent and collaborative approach is needed to support the communities living in these places.

Setting the right strategic vision

In recent years, industry has made strides in the right direction, with placemaking principles starting to become ingrained in the development narrative and an ever more prominent aspect of master planning.

There is undoubtedly further room for improvement, however, and in order to realise the full potential of good placemaking, we need to move beyond the traditional thinking of 'place'.

Places need a strategic vision based on their key capabilities and areas for potential. We need to put people at the centre of this place-based strategy development, move beyond legal minimum engagement and work with them, rather than telling them what is going to happen. This will make the process truly consultative and help to move towards a scenario where communities feel as though development is happening for them, rather than to them.

Unfortunately, even when places have a clear strategy they can end up with what Prof. Richard Rumeltvi calls a 'bad strategy': *"Vague and meaningless statements, full of fluff, failing to make any real choices to address the challenge in question and mistaking grand ambition or goals for a strategy."*

To address this, placemaking strategies need to be outcome focused. These outcomes must be tailored to the place, drawing on its unique characteristics and structured to ensure the local community benefits.

For the UK to prosper, our left-behind communities cannot be allowed to drift and stagnate any longer. A more holistic approach which joins the dots is needed if we are going to make our country feel like one.

The concept of thinking more holistically about an area is not new. The leading Victorian industrialist Sir Titus Salt, for example, built the village of Saltaire in Bradford in 1851. Realising that delivering housing and employment for his workforce was not enough, he also delivered a library, school, wash house, concert hall, hospital and a range of shops. He showed real leadership and was driven to tackle poor quality housing, poor health and choking pollution.

Today, Public Health England defines placemaking as an approach that 'takes into consideration neighbourhood design (such as increasing walking and cycling), improved quality of housing, access to healthier food, conservation of, and access to natural and sustainable environments, and improved transport and connectivity.'

It is no wonder that Public Health England is taking a keen interest in placemaking given that obesity alone is forecast to cost the NHS neary £10 billion a year by 2050, which is equivalent to around 7% of its total budget.

But true placemaking is more than just health. It is about looking at a place as a system from a people-centric perspective. Thinking about where a person may work, how they educate their children, exercise, get healthcare, shop and travel, then thinking about what can be done to meet those needs. Each component of the 'placemaking equation' impacts on another. For example, if there are convenient cycling routes to an employer, people are likely to be healthier and happier, requiring less healthcare.

Clearly, this systematic approach can become incredibly complex very quickly and if you are not careful you can end up trying to solve all of the world's problems. After a holistic review, places and communities need to decide on the issues most important to them, as this will have the greatest impact. Attention should be focused on the interventions that will help to drive positive change and achieve desired outcomes.

Part of the challenge is who's delivering the UK's new homes and what's motivating them. In the 1950s, around 90% of new homes were built by local authorities compared to around 2% of new homes today.[ix] 82% of new homes are now built by private developers, with the 'big eight' housebuilders delivering more than 50%[x] of new homes between them.

However, the tide is steadily turning, with more local authority and housing association homes being built. What's more, large corporations are under increasing public, shareholder and government scrutiny. In a clear example, we recently saw the Financial Times editorial board publish a significant article which criticised the 'crude maximisation of the share price' and stated that taking only 'narrow short-term interests will undermine the long-term survival of the [business]. It is the view of the Financial Times that "*to prosper well into the future, managers, and those who oversee them, need to take account of the wider health of the societies in which they operate.*"[xii]

Of course, while placemaking should be a consideration for any new development, there are many existing places where implementing placemaking principles will have a positive influence. For example, according to the Index of Multiple Deprivation, the top five most deprived local authority areas in England are Blackpool, Knowsley, Liverpool, Kingston upon Hull and Middlesbrough. People living in these areas can often suffer from low aspirations, particularly working-class white men, where they find themselves in so-called 'career cul-de-sacs', with limited opportunity and no clear route to improving their situation.

These places, and many others across the country, are often home to rundown council estates, built in the last century, with a range of social and economic issues. As such, they're often of little interest to the private sector, which sees the rewards as too low and the risks and complexity as too high. In these areas it means that the local or regional authority has to take a leading role, either delivering housing schemes themselves or developing a partnership or model that is attractive to the private sector.

We need the government to make policy interventions that help to unlock placemaking investment for these places and where new housing is being delivered. Otherwise there is the danger that many of the ideas simply remain ideas and are not implemented on a large scale.

Globally the number of people aged over 60 years of age will double by 2050...

Year	
1980	382m
2017	962m
2050	2.1bn
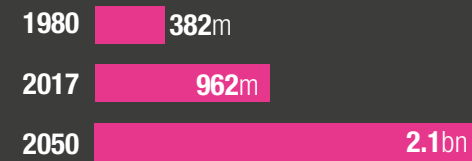
Top five most deprived local authority areas in England:

1st	Blackpool
2nd	Knowsley
3rd	Liverpool
4th	Kingston upon Hull
5th	Middlesbrough
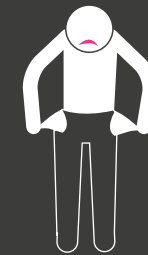
By 2050, it's estimated that obesity will cost the NHS nearly...

£10bn a year

CASE STUDY: NATIONWIDE'S NEW TOWN, SWINDON

Nationwide is the world's largest building society, with over 15 million members. Its history dates back to 1846 when 'banking products and services were available to the wealthy, while the working classes found it hard to find secure, comfortable, and long-term housing'.[vii]

Near to its current headquarters in Swindon, Nationwide's members voted to create a new community of affordable and quality homes[viii] for local people, delivered on a not-for-profit basis.

They have employed a community organiser to engage and work with local people so that they understand what they feel is important. They have commissioned architects to create 239 high-quality designed homes and a space that nurtures community and healthier choices.

There are shared gardens, spaces to meet and play and a community hub. They have designed the homes with ageing in mind. By 2050, the amount of people globally aged over 60 will have doubled, meaning a dramatic rise in demand for things like accessibility, health care and space for community groups.

The local people engaged by Nationwide said they wanted to live interspersed with older and younger people, so this is what they have done. They have included benches in key places to cater for older residents and a public crossing on the main road, as well as a new park with routes for dog walkers and cyclists to get to work.

The scheme has looked holistically at the needs of the area and thought about future trends which may impact its residents. It also looks to create elements of a blueprint for other areas around the country to consider.

By working closely with the local people, the proposals received unanimous support from the local planning authority and residents.

Fundamentally, placemaking is about the built environment and human interaction with it. What makes a good place to live, whether in an urban or rural setting? What location and place attributes are intrinsic to a person's quality of life?

This short overview considers the place and location factors that are likely to be important to quality of life, and hence important to the wider range of services a local or regional authority has to provide. Some of the components that make a good place to live include:
1. access
2. community
3. townscape
4. natural environment

1. Ability to access, either 'on the doorstep', or easily through good (public) transport connectivity:

- employment opportunities with short commute times (where applicable)
- essential public services including GPs, schools, policing and social care

2. Sense of community or belonging, including:

- social infrastructure, social capital (volunteering and peer support) and civic pride
- a local centre of gravity or cluster of 'doorstep' amenities or hubs that draw locals to congregate and increase their social interaction, also reinforcing a sense of community

- a strong high street presence, no matter how small, with some local shops or a cafe, a local pub, post office, town hall, church or work-hub

3. A pleasant townscape which:

- is walkable or cyclable and with the absence of heavy traffic
- is composed of well-maintained buildings/fewer empty properties (the so-called 'broken glass theory'), as well as buildings that are well designed or even historic

4. Natural environment, including:

- clean air, planting native species, natural light and green spaces, including a park or nature reserve

These are some of the factors often considered material to quality of life and wellbeing. Many (though not all) are found to have an impact on house prices and inequality. They can also matter to the economy through their impacts, both directly and indirectly, on productivity and service provision.

Delving into the detail
We now delve into the detail, looking at some of the most important sub-factors that feed into these overarching themes and establish them as the key ingredients in making somewhere a good place to live.

We argue that each of the following sub-factors can be supported through a considered placemaking approach (as outlined on pages 14–16) that accounts for not just local

but regional needs. Taking such an approach will not only create better places for local people, but also ensure a better return on investment for financial backers and developers (see page 12).

Productivity and connectivity
Some regions and local areas are more productive than others. Productivity is usually measured by Gross Value Added (GVA). GVA per head in the UK is currently £27,555 but varies from £20,129 in the North East to £48,857 in London. These disparities are even starker at the local authority level. Wages of residents at the local level – which are an indicator of productivity – also reflect these starker divergences: with £21,824 for residents in Middlesbrough and £78,386 for those in Westminster, for example.

Regional productivity[xiii]

	Gross value added per capita
North East	£20,129
North West	£23,918
Yorkshire and Humber	£21,426
East Midlands	£21,845
West Midlands	£22,713
East	£24,772
London	£48,857
South East	£29,415
South West	£23,499

GVA per head in the UK is currently...

£27,555

...and varies substantially from the North East to London...

£20,129
GVA per head in the North East

£48,857
GVA per head in London

Northern Powerhouse Rail (NPR) could generate annual productivity benefits of...

£3.4bn [xv]

Newcastle

Hull

Leeds

Liverpool   Manchester

Manchester Airport

Sheffield

One of the reasons cited for poor productivity in the North East, and in the north more broadly, is poor transport connectivity, particularly between the great northern cities. Better connectivity brings access to employment opportunities. It is well-known that the intercity rail links in the north are slow, with average train speeds of 45 to 55 mph belonging more in the age of steam than in the 21st century. Research by the BBC[xiv] also found that UK bus route coverage had reached a 28 year low, with the North West of England particularly badly hit.

A recent report for Transport for the North estimated that the proposed Northern Powerhouse Rail (NPR) scheme could generate productivity benefits of £3.4 billion a year through improved connectivity.[xv] With proposed NPR journey times between Liverpool and Manchester and Leeds to Manchester halved, it would mean over 14 million people across the big six northern cities lived within 90 minutes of nearly half a million businesses and the employment opportunities this enables.

Regionally, access to major centres of employment varies, though the north-south split is less apparent. The South West has the worst access on a variety of measures – only 74% of the region's working population is within 60 minutes of a major centre of employment (5,000+ employees) by public transport. Yorkshire and Humber is second-worst on this measure at 82%, but the North East and North West, more generally, do not fare badly, which suggests the issues of connectivity are more nuanced and localised.

The East and, to a degree, the South East are also likely to be adversely affected by rail and car commute times into London, which are so often subject to congestion related delays.

Long commute times are bad for wellbeing and productivity. A 2017 study of more than 34,000 workers across all UK industries found those who commute to work in under half an hour gain an additional seven days' worth of productive time each year as opposed to those commuting an hour or more.[xvi] Longer commutes also appeared to have a negative impact on mental well-being, with longer-commuting workers 33% more likely to suffer from depression. They were also 46% more likely to get less than the recommended seven hours of sleep each night and 21% more likely to be obese, according to the study.

Employment opportunities
It is essential to wellbeing that places offer good employment opportunities. However, employment rates vary considerably across the country regionally and locally.

Labour density – namely the number of jobs per local resident – is a measure of labour demand and job opportunity. There is a clear 'South versus the rest' divide in terms of job density across the UK regions, with London, the South East and South West top and the North and Midlands bottom – the North East is an especially poor outlier. This is despite the variation in access to major areas of employment being much less pronounced in terms of the north-south divide.

A lack of labour demand will usually reflect various factors, but poor business investment (including Foreign Direct Investment) is a key determinant, to which poor infrastructure and a lack of skilled labour are contributory factors. Poor labour demand inevitably reduces employment prospects – both the employment rate and wages. But when it comes to the quality of labour supply – the same 'South versus the rest' divide is apparent.

There is a self-evidently strong correlation between unemployment (or labour inactivity) and income poverty. The national Index of Multiple Deprivation is also calculated on an array of factors, including employment, income, and education, skills and training.

But aside from employment being a means to income, there are strong links between employment and wellbeing. A study for the National What Works Centre[xvii] found that unemployment is one of the most important factors affecting individual wellbeing.

A well-known study for the Department for Work and Pensions[xviii] found *"there is a strong evidence base showing that work is generally good for physical and mental health and well-being. The provisos are that account must be taken of the nature and quality of work more…"* Employment status is a main driver of social gradients in physical and mental health and mortality. Unemployment is associated with higher mortality and poor general and mental health. Work is also central to individual identity. This means that as well as the direct cost of someone being unemployed, there is also a health service cost impact too.

Health outcomes

Life expectancy is linked to income (and wealth) and poverty in particular. But lifestyle choices and the environment in which we live also matter to individual health outcomes, and hence the demand on services. Where we live has a material impact on these things and serves as an enabler for us to live healthily.

We observe that life expectancy across the nation varies more than it should, both at the regional and local levels (see table below).

In fact, there is a correlation between having more disposable income and a higher life expectancy. This can be seen when comparing the North East, where the average disposable income is £15,809 and life expectancy is 77.9, with London which has an average disposable income of £27,825 and life expectancy of nearly three years longer (80.5).

According to calculations by Oxford Economics, UK GDP in 2015 could have been over £25 billion higher had it not been for the economic consequences of mental health problems to both individuals and businesses. Mental health related issues were found to lead to approximately 17.6 million days of sick leave or one in eight of the total sick days taken in the UK.[xxiv]

	Life expectancy (male), at birth 2015–17 [xix]	Average disposable household income per head, 2017 [xx]
North East	77.9	15,809
North West	78.2	16,861
Yorkshire and Humber	78.7	16,119
East Midlands	79.4	16,932
West Midlands	78.8	16,885
East	80.4	20,081
London	80.5	27,825
South East	80.6	22,568
South West	80.2	18,984

The cost of health impacts arising from air pollution has been estimated conservatively at between...

£8bn–20bn
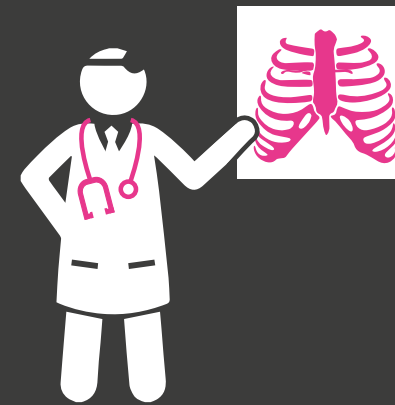
Every £1 invested in social prescribing generated a return of...

£2.30 [xxv]
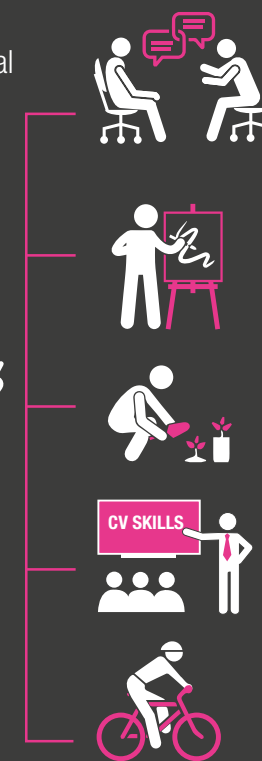
Recognising the importance of place, community and human interaction on people's health, parts of the UK have started to conduct 'social prescribing'. According to The King's Fund, social prescribing seeks to address people's needs in a holistic way and can involve volunteering, arts activities, group learning, gardening, befriending, cookery, healthy eating advice and a range of sports. Thinking holistically in this way pays dividends, with every £1 spent on this form of prescribing generating a return of £2.30 in benefits to society.[xxv]

Environmental impacts

Air quality varies across the country and has a strong urban/rural dimension, as to be expected. According to Public Health England, poor air quality is the largest environmental risk to public health in the UK, as long-term exposure to air pollution can cause chronic conditions such as cardiovascular and respiratory diseases as well as lung cancer, which clearly have a human and economic cost but also lead to reduced life expectancy. Particulate matter (PM) and nitrogen dioxide (NO_2) – through combustion of fossil fuels – are both major components of urban air pollution.

The cost of health impacts arising from air pollution has been estimated conservatively at between £8 billion to £20 billion. Further, it is estimated that, in 2012, poor air quality had a total cost of up to £2.7 billion through its impact on productivity – namely through working days lost.

In 2016, 37 of the UK's 43 monitoring zones (broadly, the regions plus the major urban agglomerations) exceeded the annual NO_2 limit.[xxi] For example, London was one of the worst and expected to remain in breach of NO_2 limits beyond 2025 without further action. Conversely, the South West was among those forecast to be compliant in 2021 without further action.

The benefit of green space

According to the World Health Organisation, green urban areas such as parks and sports fields as well as woods and natural meadows, facilitate physical activity and relaxation, and form a refuge from noise. Trees produce oxygen, and help filter out harmful air pollution, including airborne particulate matter. Green spaces are also important to mental health and some analysis suggests that physical activity in a natural environment can help remedy mild depression and reduce physiological stress indicators. This comes at the benefit to service providers and the individuals themselves.[xxii]

	Number of high-quality* parks
North East	62
North West	203
Yorkshire and Humber	68
East Midlands	125
West Midlands	120
East	152
London	407
South East	171
South West	104

High-quality* parks regionally

Community involvement

One of the key characteristics of the traditional housebuilder's 'build to sell' model is that it is driven by return on equity. This has, in some cases, led to developers and investors having limited interest in what happens after the development is sold (other than perhaps reputational). There are some virtues of this model but it also brings problems.

A recent paper by Demos, called People Powered Planning[xxvi], highlighted some of the issues in the context of the planning system. Some of the views people expressed with regards to planning and new development included:

❝ *It doesn't ever come from community it comes from a developer...feels like a big developer has come in, they're the corporate body. It doesn't have any relation to what the community wants or needs.* ❞

❝ *I feel like the whole country is being covered with these really dreadful, unsustainable estates which don't actually build communities. There's no shop there for example, there's no centre of that community.* ❞

❝ *There's not enough school places, the local GP surgery, it's not easy to get an appointment.* ❞

❝ *But you look at these new estates they're building where they are jamming so many houses together, no one is going to want to live there in 40 or 50 years - no one.* ❞

From these statements, it's clear that local people want to be involved in development decisions. It seems, though, that bad experiences with developers have generated a public mistrust that must be addressed.

But the traditional housebuilder 'build to sell' model is not necessarily inconsistent with traditional placemaking. In a 2016 report[xxvii], the real estate agent, Savills, developed a simple land value model that illustrated how upfront investment in placemaking – equivalent to 50% of standard infrastructure spending – can increase land values by 25%. They noted that in Poundbury, the urban extension to Dorchester in Dorset, new build values were 29% higher than other new build schemes in the area on a 'type for type basis'.

Key placemaking features of Poundbury include its traditional architecture and high-quality design, improved walkability and prioritisation of people over cars, local shops, and generous public open spaces, including a clear district centre marked by the square. It demonstrates it can be done, at least in locations where the land values warrant it. Another notable place-making example cited was Heywood Park, a 700-home development on a former US air force base in Bicester.

On the other hand, a long-term investment or 'patient capital' model means, as the term implies, that investors have a financial interest over a longer term once the development is built. Such conditions are likely to be more conducive to traditional placemaking. However, it also has implications for tenure, as it often means the incorporation of a significant element of 'build for rent' – either residential or, far more commonly, commercial (e.g. office space).

Placemaking has featured heavily in the urban renewal of many of our city centres over the last decade or two. CBRE observes at Liverpool One – a mixed-use redevelopment of shops, homes and a leisure complex – that retail rents have increased 17.5% versus a 7.4% decline in Liverpool overall.[xxviii] Economic modelling also demonstrates that schemes internationally which have embraced a placemaking approach have improved land value outcomes.

Amenities

Placemaking also has a role in turning around left behind places, as noted by the Centre for Social Justice.[xxix] It observes that, out of the rise of online shopping, a new 'experience economy' is emerging, which describes new spending trends with consumers splashing out on recreational activities, including cultural.

In Margate, the opening of the Turner Contemporary is responsible for much of the turn-around in the town's fortunes in recent years, with significant outcomes for local retailers – largely through increased

Placemaking can increase property values by up to...

25% [xxvii]

On average...

40

shops have been lost from every town centre since 2013

CLOSING DOWN
EVERYTHING MUST GO

footfall – such as an 'entrepreneurial spirit', 'feeling part of a community of retailers', and a 'sense of civic pride'.

The right type of housing in the right place

Moving 'beyond place' should encompass traditional placemaking, but also seek to address the wider issues and reap the potential benefits. Building housing where there is access to jobs is especially important and has all too often been neglected in relation to affordable housing especially, locking people into poverty and causing a dearth of opportunity.

New housing should, of course, be built with consideration to public transport links, in places that are walkable and cyclable, to maximise substitutability away from the combustion engine and make a contribution to improved environmental and health outcomes. This includes the school run. But, the planning of places should also place shops and amenities on the doorstep where possible – through mixed use developments – as opposed to the housing estates and out of town shopping centres of the past, which intensify car use.

Then there is access to good public services – including high-quality GP surgeries. New housing should come with new services and not tag onto those that already exist, especially if we are to increase acceptance of new housing amongst the public and turn NIMBYs into YIMBYs.

Above all, places need to work for the people who are going to live there.

Towards a better approach

As we have highlighted in this section, addressing the inequality problem is a complex challenge cutting across economic, social and environmental issues.

Despite this complexity, through a new and improved approach to creating places, our industry can make significant strides in addressing the inequality issue.

The next section of this report outlines Mace's approach to facilitating positive change.

When thinking about how to create a place that can thrive, or wanting to make an intervention to tackle inequality, you need to start with a holistic and systematic approach that considers the things that matter and make a difference to the community and the services they require. It is important to remember that inequality is not just about a lack of money.

Mace's approach considers seven spheres of influence which, after reviewing the evidence, we consider to be the critical factors in tackling inequality and creating a thriving place:

1. Health
Health is the number one concern of the British public (the number one issue in our private polling) and has received an increasingly large share of taxpayer funds as the population ages and drugs become more expensive. In fact, by 2050 the number of people aged over 60 will double, which means decision makers should start thinking about how to manage and mitigate their additional needs.

As well as the rate of ageing, our approach looks at how the smoking rate compares to similar regions around the UK, the life expectancy residents have at birth, whether there is an appropriate pipeline of elderly care accommodation and whether health services are oversubscribed.

2. Community
A sense of community means having a sense of home, participating in shared experiences and shared endeavours. As Sir John Hayes CBE MP, Chair of the Community Capital Report from the Centre for Social Justice says: *"Communities enjoy all kinds of meaningful exchanges on the basis of reciprocity – not merely transactions – so mitigating inequality and the powerlessness it might otherwise seed."*

One of the challenges local authorities in particular face is pressure on their finances. In a recent survey, two thirds of councils said they feel they will not be able to afford discretionary services beyond 2023. Over the last few years, 121 libraries, 600 youth centres and over 200 playgrounds have closed.[xxx] These are the very places for people to meet and build connections. Worryingly this is set to be exacerbated with 45% of local authorities currently considering whether to sell or transfer local parks and green spaces.

We suggest considering how local amenities and cultural facilities compare with similar areas, whether minority groups are disproportionately affected by deprivation and the impact green space has on public health outcomes.

3. Education
Education is well known as an important factor for people to improve their life chances and get out of poverty. However, regardless of how good a school is or not, family background continues to play a major role in the educational outcomes for children and young people.[xxxi] When looking at left-behind places around the UK, 36% of their residents have no formal qualifications at all.

200+
playgrounds have closed since 2014 [xxx]
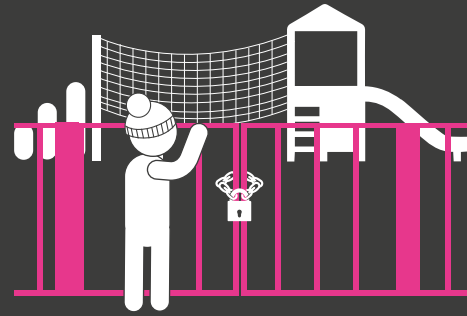
121
libraries closed in 2016 alone [xxx]
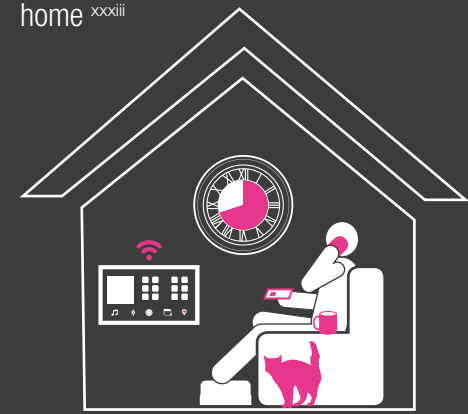
SAVE OUR LIBRARIES

Since 2005, the sense of belonging among young adults (20–29) has declined by...
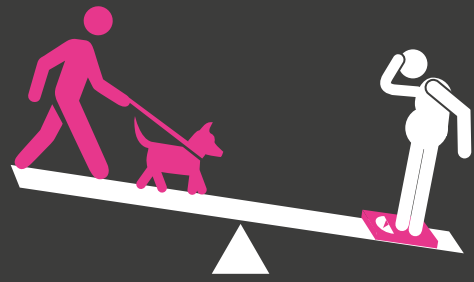
32%

70%
of people's time is spent inside their home [xxxiii]

Residents who live in walkable communities weigh...

3–5kg
less on average [xxxiv]

We suggest looking at skill levels of local people relative to available local jobs, the proportion of young people who are not in education, employment or training (NEET), how the local schools are performing and the capacity of local schools to cope with growth in the population.

4. Economy
Headline figures about a local economy relating to GDP can often miss the subtlety and detail which drives an economy.

Decision makers need to understand which sectors and employers are locally important, whether there are enough local workers to meet future demand, the impact more apprenticeships could have on welfare budgets and whether the local retail centre needs to be right-sized to reflect modern shopping patterns.

5. Housing
1.4 million people across England live in poor quality housing according to research conducted by Heriot-Watt University for the National Housing Federation.[xxxii] Given that around 70% of people's time is spent inside their home[xxxiii], this poor-quality housing can impact both physical and mental health, which impacts services provided. There is also, of course, a UK-wide undersupply of housing – particularly affordable homes – alongside the demand for accommodation suitable for older people.

Our approach suggests looking at the characteristics of the current housing stock, if there is a shortage or predicted shortage of housing types, the impact boosting housing supply of a certain type will have on the economy and whether any particular groups are excluded from the housing market.

6. Infrastructure
Improved connectivity – whether physical or digital – has well-established productivity benefits thanks to agglomeration and time saved. But infrastructure that makes it easier to walk to your desired destination or cuts your journey time, for example, can bring about health benefits too. Residents who live in a 'walkable' community have been shown to weigh 3–5kg less on average[xxxiv], while the impacts of a longer commute on mental and physical health have been estimated to cost the equivalent of seven days a year.

Transport also has a significant role to play in addressing environmental challenges. The UK Government has also pledged to achieve 'net zero carbon' by 2050, and with a third of UK carbon emissions coming from transport, there is undoubtedly an opportunity to make a real difference by thinking more holistically about how people move to, from and around places.

We suggest looking at whether there is a high degree of car dependency in the area, what impact encouraging cycling and walking could have, or the delivery of other infrastructure that improves journey times, or rolling out new or improved broadband. Future or current energy needs should also be considered.

7. Security

Over the last 18 months the issue of tackling crime has risen up the public and political priority list, with knife crime reaching an all time high in September 2019.[xxxv] It is no wonder that in our polling for this report nine out of ten people rank the crime rate and visible policing as an important factor when deciding where to live. As well as a direct cost to victims of crime, there is also an indirect financial cost to local people, with one study putting an anti-social behaviour price tag of at least £3 billion a year on the shoulders of communities.[xxxvi]

We suggest organisations ask what types of crime are problematic in the local area, whether there is sufficient emergency service capacity to accommodate population changes and whether savings could be achieved through more secure designs.

A holistic approach is crucial to success

By considering these seven spheres in any decision-making process, people are better able to understand what is driving a place, its challenges, opportunities and how to respond for maximum positive impact.

What this means in practice – Greater Manchester

Mace was commissioned by the Greater Manchester Combined Authority to take a placemaking approach to the delivery of 24,000 new homes around the city.[xxxvii] Understandably, the Combined Authority wanted to maximise the positive impacts of such a large house building programme.

We took a holistic approach which considered the people of Greater Manchester and their current and predicted needs.

As the population of the city ages, the cost of providing care is becoming an increasing burden on local authority budgets. Research indicates that the average weekly cost of a low level residential care placement across Greater Manchester is £411 per person, but that this could be avoided if more Extra Care Housing was built as part of the programme. Taking such an action could save around £250 a week per person, which equates to savings of around £3 million annually.

If this was combined with building new homes to an 'accessible and adaptable' standard – which would reduce falls needing treatment – further savings of around £1 million a year to the NHS can be expected.

Given the positive health impacts of green spaces, building new homes or delivering regeneration projects with such space for residents would save the Greater Manchester healthcare budget around £5 million every year.

With crime and policing rising up the public priority list, the Greater Manchester Combined Authority is understandably looking to 'design out' opportunities for crime and anti-social behaviour. According to research by the Home Office, a single instance of domestic burglary costs £5,930. If through better design, for instance, the burglary rate among new or renovated homes was 20% lower than today's burglary rate, savings of £700,000 per annum could be realised.

All in all, taking all of the pillars into account, £37 million of additional benefits can be generated each year for Greater Manchester, reducing demand on services. This figure does not include the standard benefits like construction jobs supported or apprenticeships created, but rather considers the additional benefits generated by thinking differently.

Annually, antisocial behaviour costs the public sector at least...

£**3**bn [xxxvi]

Building new homes in Manchester to an 'accessible and adaptable' standard could save the NHS around...

£**1**m

a year.
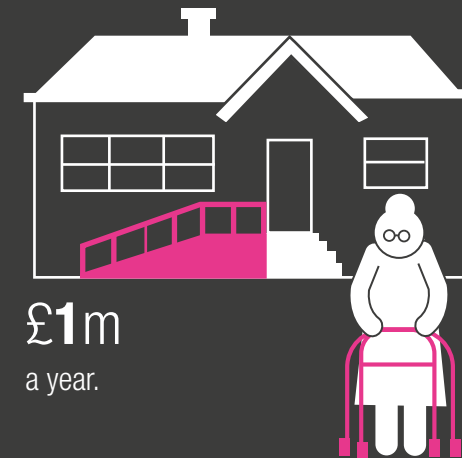
CASE STUDY:
NORRA ÄLVSTRANDEN, GOTHENBURG

Located on Sweden's west coast, Gothenburg is Sweden's second city, home to 600,000 people and with an economy worth US$84.4 billion. Starting in the 16th century, the area of Norra Älvstranden, on the north bank of the estuary into the Kattegat sea, was the site of shipbuilding, which accelerated in the industrial revolution. These shipyards employed around 15,000 people until the 1970s 'shipbuilding crisis', which happened as a result of foreign competition and the oil crisis.

The docks became derelict and their regeneration and rebirth took time to get off the ground. However, thanks to leadership from the city council, their rundown image started to change. The council invested in a range of educational and research facilities and started holding major music events.

A proactive City Council owned development agency began to create a stylish mixed-use quarter. It took a strategic view in close cooperation with local people and businesses to lead the redevelopment.

The city took a view on what made them different and looked at its unique assets to develop a vision that worked for them. They worked closely with universities and leading companies (including Ericsson and Volvo) to create a cluster of knowledge-intensive firms, and homes. They also committed to education (particularly technical education) and job-related training, so that the city's residents would have access to the good jobs created, rather than simply bringing people in from outside the area which brings much lower benefits.

Norra Älvstranden now provides more jobs, more housing and a much better environment than it did in its industrial heyday.

With many people across the country feeling as though their voices haven't been heard as development has taken place around them, we commissioned a private poll to help understand what people thought about the places they live, the challenges they face and what they see as the solutions.

The findings of the polling are outlined below and given in full in Appendix 1. They flag a number of interesting points, including the importance of healthcare provision when choosing a place to live. In recognition of this, we delve deeper into this area later in the report.

Recent research from the think tank Demos[xxxviii], carried out for Nationwide Building Society, found low levels of engagement in the planning system and a sense that people often feel 'shut out' from decisions about house building in their area. The impact of this lack of engagement means that housing developments often fail to match the needs and desires of local

residents, leading to opposition and conflict in the planning system, which subsequently slows housing delivery.

Very often, making a formal objection to a planning application can be seen by the public as the only means of influencing the house building process, thus creating a culture of conflict in the planning system.

Placemaking tries to put people and local communities at the centre of decision making in order to 'move beyond the physical place'. This approach means happier local people, better returns on investment and a bigger positive societal impact of the project. It has also been shown that consulting local residents about a particular development could increase support for that development by 10%.[xxxix]

When thinking about where to live, how important are the following factors to you?

|	People rating it as 'very important'
Good local health facilities (e.g. a GP or hospital)	6/10
Low crime rate and visible policing	5/10
Good transport links	4/10
Job opportunities	4/10
Good local schools and nurseries	4/10
Good digital connectivity	3/10
Well-designed homes	3/10
Local restaurants, shops and bars	2/10

90%
of people think having a good local GP and low crime rate is important in deciding where to live

Based on respondents selecting 'very important' or 'quite important' in Mace polling

71%
of people surveyed were willing to pay a price premium on homes in areas which have good healthcare, low crime and good transport links
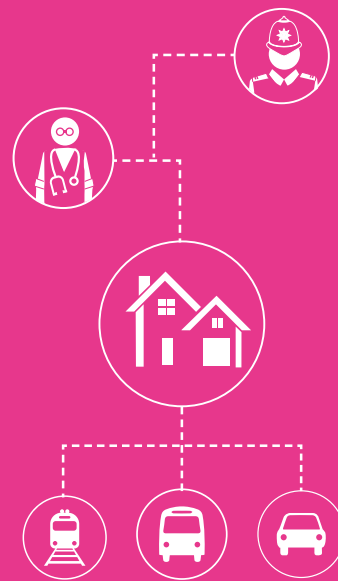
While each place and individual development will need to understand its local people and what motivates them through direct engagement, there is value in assessing the wider public position. Looking at our suggested seven spheres, we commissioned private polling from Survation to better understand what drives people nationally and their thoughts on housing delivery. The survey was conducted in September 2019 and is a representative sample of 2,053 UK adults who were interviewed online. The findings, along with our commentary are given below.

It is clear from the research that people put their health and security at the top of the tree in terms of priorities. When including all the positive ratings towards a particular answer, 90% of people rate local health facilities and a low crime rate as important to them.

This shouldn't be surprising given the ageing population of the UK and the high levels of publicity surrounding rising crime rates, particularly knife crime. They also fit with the basic first tier of Maslow's hierarchy of needs (physiological and safety needs), which must be addressed before people can think about things like work and local amenities.

The polling also clearly showed (71%) that people are willing to pay a price premium on homes in areas which have good healthcare, low crime and good transport links. This indicates that developers should see a commercial benefit from taking a placemaking approach which addresses these concerns in particular.

Our research showed that there was a slight preference for investment into places to come from local businesses or from the local authority. This preference is likely an indication of people's understandable belief that organisations with a local connection better understand local people and what they are looking for.

In terms of political parties, 23% of the public thought that 'none' of them are good at delivering good places to live, although nearly half indicated that if politicians made this a priority, they would be more likely to vote for them. This provides an additional political benefit of delivering a placemaking approach that goes above and beyond the economic and societal factors already identified.

When asked about how to solve the housing crisis, the most popular suggestion by quite a margin was to make better use of empty properties (72%), with restrictions on foreign ownership coming in second place (43%). The indication that the public's views on how to solve the lack of good quality housing are quite authoritarian will be of concern to decision makers, but nonetheless give a clear indication that more action is needed.

In order to demonstrate the impact placemaking can have on addressing inequality, we commissioned detailed modelling of healthcare provision in the UK. From the outputs, we have been able to establish the key issues and make recommendations for improvements.

Our polling shows that having a good local GP surgery is very important to people and is a consideration when deciding where to live. Additionally, £200 billion a year[xl] is spent on healthcare in the UK, which makes it the largest area of public spending and, therefore, of keen interest to local, regional and national government.

Thinking about a place holistically clearly has a role to play in reducing this financial burden, while improving quality of life. For example, a study by the Greater London Authority found than increased access to urban green spaces can reduce the cost to mental health services by around £60 per person.[xli] When scaled up for a town or city, this is a significant cost.

With this in mind, we wanted to explore how demand for GP services, their supply, access to them, and user experience varies across local areas to assess whether there is a 'postcode lottery' and to consider what impact this has on people's lives and health inequalities.

There are around 6,500 GP practices in England, spread across 195 Clinical Commissioning Groups (CCGs), with the vast majority

receiving a 'good' Care Quality Commission (CQC) rating.[xlii] Many of these CCGs – such as those in London – align fully to local authority boundaries. However, some CCGs cover more than one local authority, indeed, NHS Northern, Eastern and Western Devon CCG covers nine.

As well as the CQC data, our study utilises the NHS Digital General and Personal Medical Services Experimental Statistics (including the annual NHS GP Patient Survey) and the Department for Transport journey time statistics in the analysis.[xliii, xliv, xlv]

Our modelling shows a high degree of variability across local areas when it comes to demand for GP services, their supply, access to them, and user experience. Where we live strongly determines the demand-supply dynamic and, in turn, how well we can access GP services and how good they are. Our polling suggests this also matters to house prices.

Demand for GP services

There are around 300 million GP consultations annually[xlvi] and the average person sees their GP around five times a year. Visits rise with age and particularly so for the over 75s. Naturally there is a strong correlation between those with a long-term condition, disability or illness (CDI) and the over-75s. The local age demographic, is therefore, an important factor driving demand for GP services in a local area.

We selected three metrics to gauge demand for GP services. They are the proportion of registered patients who:

1. are 75 or over,
2. have a long-term health CDI, and
3. have visited their GP within the last three months.

Nationally, 7.8% of the public are 75 or over, 51.4% of the public have a long-term CDI, and 52.9% have visited their GP within the last three months.

NHS CCG	LAs covered	75 or over (%)	Long-term CDI (%)	Visited within last 3 months (%)	Rank (out of 195)
Southport and Formby	Sefton	12.6	61.7	56.7	1
Isle of Wight	Isle of Wight	12.3	62.0	55.0	2
Eastbourne, Hailsham and Seaford	Eastbourne, Lewes, Wealden	12.7	58.9	56.6	3
Durham Dales, Easington and Sedgefield	County Durham	8.8	60.1	58.5	4

The top four highest local areas for demand are set out below. They show that Sefton and the Isle of Wight are the highest demand areas – both have a high propensity of elderly people registered at their GP surgeries. Country Durham is also a high demand area because a percentage share of its population has a long-term CDI (60.1%), despite an over 75s population share close to the national average (8.8% versus 7.8%).

The lowest demand local areas are all in London – Hammersmith and Fulham, Newham, Wandsworth and Southwark – which, given the age demographic, is unsurprising. Fewer than 4% of registered patients are 75 or over in these local areas.

So when it comes to demand specifically, where we live has a bearing on the incidence of long-term health conditions, disabilities and illnesses (CDI). Not all of this is about the propensity of the elderly population locally, but about deprivation and lifestyle factors that thinking 'beyond place' could have a material impact on.

As well as being part of the natural aging process, many long-term CDIs are related to lifestyle – e.g. exercise, diet, use of alcohol and recreational drugs – some of which can, in turn, be related to income, deprivation and poverty. The link between unemployment and mental health (depression) has already been discussed. But there is a wealth of medical evidence showing the link between lack of exercise and musculoskeletal problems (arthritis etc.) and the link between diet (amongst many other

factors) and diabetes. Both diet and exercise have a heavy bearing on high blood pressure, as does smoking. Breathing conditions such as asthma can be related to the natural environment and air quality while many lung diseases are caused predominantly by smoking, such as Chronic Obstructive Pulmonary Disease 'COPD' (e.g. chronic bronchitis).

Below, we construct CDI incidence scores which simply sum the percentages of population afflicted by each of the five most common long-term CDIs, noting that some people have two or more. We find scores in the CDI blackspots of 83–88 and nearly double those in the 'most healthy' areas (42–46), shown in the tables below. Amongst the blackspots is a prominence of local areas which have higher levels of deprivation, including Blackpool and Knowsley.

Areas with the least (best) incidence of long-term CDIs, by CDI

NHS CCG	LAs covered	'Big 5' long-term CDI (combined) incidence score	Rank
Wandsworth	Wandsworth	42	1
Hammersmith and Fulham	Hammersmith and Fulham	44	2
Richmond	Richmond upon Thames	46	3

Areas with the most (worst) incidence of long-term CDIs

NHS CCG	LAs covered	'Big 5' long-term CDI (combined) incidence score	Rank
Durham Dales, Easington and Sedgefield	County Durham	88	195
Knowsley	Knowsley	85	194
Blackpool	Blackpool	83	193

Access to GP services

In many urban areas (including much of London) nearly all of the public live within 15 minutes of a GP surgery, either by walking or use of public transport. But, in around a dozen (mainly rural) local areas, less than half the population can get to a surgery within 15 minutes using these transport modes. The urban/rural dimension is an important one, notwithstanding that many of those living in rural areas are making a conscious choice to do so, including for lifestyle reasons. They may also rely more heavily on the car to get around rather than public transport.

Access to appointment times that are convenient for patients is another measure of access we have used for the analysis. Not being able to get an appointment, or only being able to get one on the same day, to the frustration of many, has been a prominent electoral issue in the past. Nationally, 65% of the public are very satisfied or fairly satisfied with the appointment times they are offered, ranging from 44–78% across the CCGs.

The most accessible GP surgeries on these metrics are in London boroughs and other cities. Liverpool comes in at fifth, as the first local area outside London.

Predominantly rural areas dominate the least accessible in terms of journey times.

Areas with most accessible GP services

NHS CCG	LAs covered	Population within 15 minutes* of GP surgery (%)	Those satisfied with appointment times offered (%)	Rank
West London	Kensington and Chelsea	100.0	71.9	1
Wandsworth	Wandsworth	99.2	69.9	2
City and Hackney	City of London, Hackney	98.8	68.7	3

*walking or by public transport

Areas with the least accessible GP services

NHS CCG	LAs covered	Population within 15 minutes* of GP surgery (%)	Those satisfied with appointment times offered (%)	Rank
Corby	Corby	63.7	44.3	195
South Norfolk	Breckland, South Norfolk	50.0	61.9	194
North Cumbria	Allerdale, Carlisle, Copeland, Eden	52.4	65.0	193

*walking or by public transport

There are...

twice

as many GPs per person in the top five local areas...

Wandsworth
Lambeth
Richmond
Bath & NE Somerset
City & Hackney

...compared to the bottom five

Lincolnshire East
SW Lincolnshire
Mid Essex
Thanet
NE Essex

Nationally there are around...

1,400

people per GP

RECEPTION

Experience of GP services

Nationally, there are around 1,400 people per GP, or equivalently around 70 GPs per 100,000 population. This varies across the nation's commissioning group areas, from 43 GPs per 100,000 people to 101. Nationally, around 84% of people are very satisfied or fairly satisfied with the experience of their GP practice ranging from 72% to 93% across the CCGs. The ratio of GPs to patients (supply) is moderately and positively correlated with people's experience of their GP practice. More affluent areas dominate the areas with the highest GP survey experience ratings.

Areas with the highest GP surgery 'experience' rating

NHS CCG	LAs covered	Satisfied with experience of GP surgery (%)	Number of GPs per 100,000 population ('supply')	Rank
Hambleton, Richmondshire and Whitby	Hambleton, Richmondshire, Scarborough	93.0	82.9	1
Harrogate and Rural District	Harrogate	91.6	89.6	2
South Warwickshire	Malvern Hills, Warwick, Stratford/Avon	91.4	87.6	3

Areas with the lowest GP surgery 'experience' rating

NHS CCG	LAs covered	Satisfied with experience of GP surgery (%)	Number of GPs per 100,000 population ('supply')	Rank
Bradford City	Bradford	72.4	71.8	195
Medway	Medway	73.6	54.6	194
Barking and Dagenham	Barking and Dagenham	73.6	66.8	193

To recap, the analysis indicates that where you live can have a bearing on how healthy you are, irrespective of age. It has a bearing, therefore, on demand for GP services. It also has a bearing on supply of GP services (GPs per head), and, therefore, on people's access to GP services and their experience of them.

Crucially, the number of GPs per head (supply) does not appear to correspond with demand. There are twice as many GPs per head (94 per 100,000 people) in the top three local areas as in the bottom three (47 per 100,000 people), while the corresponding demand in the latter area grouping assessed by age and long-term CDIs is actually *higher*.

In other words, there appears a mismatch in demand and supply of GP services across the CCG areas on the measures selected.

The result of this is poorer and less accessible services in high demand areas. The upshot is that there remains something of a postcode lottery when it comes to the demand-supply imbalance in GP service provision. In turn, this determines access to, and experience of, GP services. Wandsworth in London has relatively the best demand-supply balance, and access and experience are also very good. At the bottom, high demand and lack of supply invariably makes for impeded access and a poorer experience of GP services.

Ending this postcode lottery by 'levelling-up' to 94 GPs per 100,000 people, regardless of location, would require an additional 14,000 GPs in England.

Top three areas overall for healthcare

NHS CCG	Demand Rank*	Supply Rank**	Access Rank	Experience Rank	Overall Rank (out of 195)
Wandsworth	3	2	2	38	1
Lambeth	5	1	4	96	2
Richmond	25	22	22	43	3

Bottom three areas overall for healthcare

NHS CCG	Demand rank*	Supply rank**	Access rank	Experience rank	Overall rank (out of 195)
Lincolnshire East	187	169	191	174	195
South West Lincolnshire	176	179	186	123	194
Mid Essex	117	174	187	170	193

*1 indicates least demand, 195 indicates most
**1 indicates most supply, 195 indicates least

In the 1950s, Stevenage was unique and revolutionary. It was the UK's first post-World War Two New Town and a bold solution to a housing crisis. In the swinging sixties, the town gained a reputation for being cool and it served as a role model for 20th century living. Seventy years on, the town centre environment is ageing and feels uninviting. It's in need of fresh investment and regeneration. What's more, as with many high streets across the country, changing shopping habits, increased business rate burdens, and retail brand closures have left Stevenage facing the challenge of adapting to an entirely new environment and needing to re-imagine its town centre.

Previous development proposals were shelved as a result of the 2008 financial crisis but, in 2018, Stevenage Borough Council selected Mace as its development partner to transform 14.5 acres of predominantly public sector owned land, just a stone's throw from the mainline rail station. The mixed-use scheme, known as SG1, will inject over £350 million of investment into the town. It is planned as a phased redevelopment over a ten-year period and will draw more activity into the town centre, with over 1,700 residential apartments helping to increase footfall and demand for services, retail and leisure. This will include shops, bars and restaurants, as well as a state-of-the-art health centre, public library, exhibition space and council offices all under one roof, providing a new civic heart. It's all planned around new, attractive and high-quality streets, squares and public realm, connected by better pedestrian and cycle links across the town.

Importantly, the plans have been influenced by local people. An intensive period of engagement with residents, businesses, and key stakeholders pinpointed local priorities, needs and hopes for the future, with the feedback helping to shape the plans and interventions that can make the biggest difference to the town and its communities.

In recent years, Stevenage has received an unjustified poor reputation, despite its excellent transport links into London and to the north, as well as world class science-based industries and economic prospects. Within the town, however, there was a very different picture. The engagement unearthed a powerful sense of community pride, along with overwhelming support for getting on and regenerating the town centre.

Chief among the priorities and expectations highlighted by local people during the consultation process were better and greener public places and spaces, improvements to how residents access public services, the quality of the built environment, a healthy town centre that thrives again, improvements to public transport, and creating a better place for future generations.

These factors have been incorporated into the town plan, with one clear example being the co-location of the council's health, education, and public and community services under one roof in an integrated hub at the heart of the development.

With its innovative social infrastructure, Stevenage was ahead of its time when originally built as a new town. Now, once again, Stevenage is breaking ground, piloting a new approach for a network of 'Healthy Hubs' to be rolled out across Hertfordshire. This is a trailblazing public health initiative, which encourages services to prioritise preventative health management and improvements for the population, along with social prescribing, NHS health checks, tackling obesity and diabetes, drug and alcohol support, smoking cessation, and sexual health advice.

Crucially, by taking this coordinated approach to healthcare, as well as providing better access to green space and public realm improvements, it is expected that the town will see a reduction in the demand for GP appointments. In turn, based on the findings of Mace's SG1 Economic Benefits and Wider Social Value Report, this could potentially result in savings of £3.7 million to the NHS and an estimated £4.7 million of net social value.

The SG1 development is a creative example of a partnership between the public and private sectors, with Stevenage Borough Council putting to work its existing land interests to promote economic and physical regeneration, and Mace, as development partner, bringing the investment and delivery capability to deliver a long-term spatial, economic and social transformation which, in turn, will ensure an enduring legacy for the town.

The research in this report clearly lays out the importance of moving beyond a traditional understanding of place if we are to solve the UK's inequality crisis. If we can create an environment in which placemaking interventions across the seven spheres of influence are encouraged in both the private and public sectors, we can deliver better outcomes for everyone.

We set out our recommendations for both policy makers and the private sector to encourage the regeneration and revitalisation of communities around the UK, whether they are new or existing.

One clear overarching theme from our research is the need for a multi-agency approach. Our recommendations aim to encourage collaborative partnerships and drive a holistic approach to addressing the issue.

1. Implement supercharged development corporations

It was clear from our findings that partnership working is crucial to success and that there are ways we can improve the relationship between public and private sector.

Building on the Government's recently announced Development Corporation Competition, we suggest supercharging them: creating a special zone to support specific placemaking interventions and to try and improve the private sector investability of an area. We suggest that these areas receive zonal planning rights to rapidly reduce bureaucracy, a dedicated targeted public allocation of funds to create an 'anchor' for the place or improves connectivity, and

where private investors receive a 30% tax rebate as happens when investing in start-ups or small companies through the Enterprise Investment Scheme. Local authorities should have to partner with a housing association, private developer or long-term investor and submit their bid to the Ministry of Housing, Communities and Local Government or appropriate combined authority, who would make decisions as to who meets the criteria and has the best prospects of successful regeneration.

2. Embrace Foreign Direct Investment Finance (FDIF)

In more recent years the Department for International Trade has moved to include foreign investment into the UK in its trade statistics.

We ask whether this could provide our left-behind towns with a source of much needed investment.

International capital channelled in the right way can be a powerful source for good, which does not burden the UK taxpayer. When looking at some of the places of greatest inequality, they are in great need of targeted investment, following a holistic review of where the greatest long-term benefits would be gained. The Department for International Trade could create a prospectus of commercial opportunities for foreign investment into the UK, including areas for placemaking potential, which could be guaranteed by Foreign Direct Investment Finance.

This bold and pioneering approach could unlock a tremendous amount of international finance and transform areas around the UK.

3. Homes England loans

Continuing on the theme of securing investment, we suggest that all developers, whether in a Supercharged Development Corporation or not, should be able to access loans from Homes England to finance new home building if certain placemaking conditions are met. These loans would be of no cost to the taxpayer, but would be repayable and secured against the new homes. They could operate in the same way as the current schemes, which provide loans at a discounted rate compared to the market, if the project meets the threshold of affordable housing.

Not only will this help to raise funds, it will help to encourage the uptake of best-practice placemaking principles.

4. Accelerated planning process for applications that meet placemaking requirements

Building on the principles of recommendation three and our wider belief that placemaking principles must be incorporated in development proposals, we also look to the Ministry of Housing, Communities and Local Government for support.

One of the risks involved in delivering a scheme of either new homes or regeneration is going through the planning process, which can be uncertain, slow and unpredictable. The Ministry of Housing, Communities and Local

Government should develop an accelerated planning process with a fixed timetable for a decision if a scheme delivers a placemaking approach.

5. Establish a placemaking levy

Our polling shows that one of the most popular housing shortage solutions with the public is 'making better use of empty properties' with nearly eight out of ten people favouring this policy approach. Clearly, the UK has a long history of respecting property rights and it would be wrong to confiscate empty property or land from its owner. Local authorities are able to charge a double council tax rate on properties which have been left vacant for more than two years, which in reality makes limited impact on the most wealthy. We think that the Government should consider introducing an additional 'Placemaking Levy' which can be set by local councils and placed into a special national fund to support and encourage local placemaking interventions in areas of greatest need.

6. Healthcare housing

Given the importance members of the public place on access to good healthcare and the significant amount of public funds received by healthcare services in the UK, combined with a severe shortage of GPs[xlvii], we recommend that some developers and local authorities may want to provide discounted homes within their projects for healthcare professionals who are working or want to work locally.

This already happens on a very small scale at hospital developments, but could be dramatically expanded to help end the healthcare postcode lottery by attracting doctors to those areas experiencing shortages.

7. Modify NHS planning guidance

To further address the issue of healthcare provision, we suggest a more considered approach during the early planning process.

Sustainability and transformation plans (STPs) were introduced at the end of 2015 to encourage the public sector to develop 'place-based plans' for the future of health and care services in their area. Planning guidance was created by the Department for Health to help local areas create STPs. This guidance for future planning should be modified to ensure particular attention is given to local housing and ensuring it promotes wellbeing and reduces demand on service provision.

Sample size: 2,053	**Fieldwork dates:** 10–12 September 2019	**Methodology:** People aged 18+ living in the UK were interviewed online.

When thinking about where to live, how important are the following factors to you?	Very important	Quite important	Not very important	Not at all important	Don't know
Local health facilities (e.g. a GP, hospital)	59%	32%	7%	1%	1%
Low crime rate and visible policing	54%	37%	6%	1%	1%
Good transport links (e.g. near to a train station, good access to the motorway etc.)	44%	40%	12%	2%	1%
Job opportunities	40%	31%	14%	13%	2%
Good local schools and nurseries	36%	25%	16%	22%	1%
Good digital connectivity (e.g. super-fast broadband or 5G)	32%	47%	15%	4%	1%
Well-designed homes	29%	50%	17%	3%	1%
Local restaurants, shops and bars	23%	51%	21%	4%	1%

To what extent would you be more or less likely to be willing to pay for a home in an area with the features that are most important to you?

Much more likely	21%
Somewhat more likely	50%
Neither more nor less likely	24%
Somewhat less likely	1%
Much less likely	<1%
Don't know	3%

To what extent would you be more or less likely to vote for a political party that gave you a greater choice of 'good places to live'?

Much more likely	14%
Somewhat more likely	34%
Neither more nor less likely	44%
Somewhat less likely	2%
Much less likely	<1%
Don't know	5%

Which political party do you think is best at delivering 'good places to live'?

Labour	20%
Conservative	19%
Liberal Democrat	7%
Green	6%
The Brexit Party	4%
Other	1%
None	23%
Don't know	19%

Which of the following is your preferred source of investment into your local community?

Local council	26%
Local businesses	21%
The UK Government	15%
Regional/combined authority	10%
National or international businesses	4%
Other	1%
No preference	15%
Don't know	8%

The UK Parliament Public Accounts Committee has stated that the UK is in the grip of a housing crisis, with a severe shortage of affordable homes in some areas. Who do you think is responsible for the housing crisis? Please select all that apply.

The UK Government	64%
Private housing developers	38%
Local councils	37%
Housing associations	20%
Regional/combined authorities	16%
Other	5%
None of the above	2%
Don't know	8%

Which of the following do you think could help to solve the housing crisis? Please select all that apply.

Making better use of empty properties	72%
Placing restrictions on foreign ownership	43%
Quotas on immigration	36%
Incentivising people to live in appropriately sized homes	33%
Incentivising people to live in rural locations	19%
Other	11%
None of the above	2%
Don't know	5%

Are new homes being built in or around your local area?

Yes	76%
No	19%
Don't know	4%

In your view, how good or bad would you say is the quality of new homes being built in and around your local area?

Base: Respondents with new homes being built in or around their local area

Very good	12%
Quite good	37%
Neither good nor bad	27%
Quite bad	13%
Very bad	3%
Don't know	9%

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