

Health, Wellbeing, Education and Place Building:

The role of place building in
large residential developments
on health, wellbeing and educational
outcomes of residents in the UK

May 2025

UCEM
UNIVERSITY COLLEGE
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Foreword

UCEM is proud to present this insightful research report, supported by Savills. It underscores our commitment to understanding and improving the vital relationship between thoughtfully designed communities and the quality of life for residents across the UK.

Creating vibrant, sustainable and inclusive places is fundamental to addressing some of the most pressing societal challenges we face today. As this report demonstrates, effective place building, through strategic planning, visionary leadership and community-centred approaches, has a measurable impact on health, wellbeing and educational outcomes. The correlation between well-designed residential developments and positive life outcomes reinforces the importance of integrated planning that goes beyond merely providing housing to foster thriving communities.

At UCEM, we firmly believe that education, professional expertise and collaborative research play central roles in equipping professionals and policymakers to create and maintain these dynamic communities. The insights shared in this report offer valuable lessons for developers, planners, educators and policymakers, highlighting the characteristics and strategies most associated with successful outcomes in new mixed-use developments.

I would like to extend my sincere thanks to the Savills research team and all contributors involved in producing and authoring this analysis.

Together, the built environment sector can build better places that support healthier, happier and more educated populations, laying the foundations for resilient communities now and for generations to come.



Ashley Wheaton (HonRICS)

Vice Chancellor,
University College of Estate Management (UCEM)

Acknowledgements

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Executive Summary

Many factors are known to affect health, wellbeing and educational outcomes, such as income, social status, social support network, genetics and physical environment (as identified by the World Health Organization). This report is an initial study to consider the impact of 'place building' in new build developments on the health, wellbeing and educational outcomes of their residents in the UK. Although it is not always possible to distinguish between factors affecting outcomes, this research provides a starting point to explore the impact of place building and provides an analytical basis from which future studies can build.

Sites

For this analysis, we have studied 71 residential sites across England, Wales, and Scotland. These sites are located on the edge of existing urban areas or within new settlements, they involve the development of at least 1,000 homes and are relatively established, having been delivering homes for at least the past 5 to 10 years.

The sites are located in a range of markets with varying degrees of place building (also commonly referred to as 'placemaking'). We have examined the characteristics of each site and given them a place score based on 12 different elements (aiming to identify which sites have greater levels of sustainability, access to jobs, walkability, community, amenities and retail offer, a greater vision and stewardship and are in greater demand relative to their local area). This has then enabled us to compare the level of place building to the health, wellbeing and education outcomes of residents on the sites.

A key observation is that on the vast majority of sites the population is younger, and incomes are higher than the local authority average – factors which result in residents typically being in better health. Although there is no clear correlation between place score and incomes, higher quality sites with better

place building (and often higher values) tend to attract higher earning residents who are more likely to have better health and ensure better education for their children. Additionally, the proportion of affordable housing on the sites has been measured and considered to assess if it has an impact on the results.

We acknowledge that much of the work undertaken finds correlations (relationships) between the measures and doesn't necessarily indicate the cause – further work would be needed to investigate this more fully.

Health, wellbeing and place building

Analysis of health and wellbeing metrics shows that residents on all the sites studied consider themselves to be in better health than the local area average. Although there is a lot of variation, this research shows that those who live on sites with a higher place score are more likely to have better health and wellbeing outcomes, even controlling for the tenure mix on the site. Sites with better place scores tend to be less deprived and have lower crime rates than their local areas. Relative to the local authority average, they also have fewer emergency hospital admissions, fewer deaths of under 75-year-olds and less child poverty and obesity.

The research suggests that sites with better health and wellbeing outcomes commonly have more and better quality green spaces and parks, a stronger vision (clear communication of what the place will become once the development is complete) and effective master planning and greater amenity and retail provision. Providing these characteristics on sites will not be the only factor affecting the health and wellbeing of residents; however, this analysis does show that they are likely to be a direct or indirect contributing factor.

Education and place building

Our analysis of attainment at KS2 and KS4 level (when at primary and secondary school respectively) shows that although there is a broad scatter, pupils tend to achieve better results at schools on sites where there is greater place building. It is also more likely that schools on sites with greater place building have an 'Outstanding' Ofsted rating.

For primary schools, sites where there is greater use of public transport, better green spaces and parks and greater amenity and retail provision are most closely associated with better education outcomes. For secondary schools, sites where there is a strong vision and more effective master planning, better green spaces and parks, greater amenity and retail provision, and greater community engagement are most closely associated with better education outcomes.

Providing these characteristics on sites will not be the only factor in the success of pupils, however, this analysis does show that they are likely to be a direct or indirect contributing factor in better educational outcomes.

Health, wellbeing, education and place building

In summary, we find that typically there are better health, wellbeing and education outcomes for residents living on sites where there are greater levels of sustainability, access to jobs, walkability, community, amenities and retail offer, have a greater vision and stewardship and are in greater demand relative to their local area.

Sites where there is a strong vision and master planning, better green spaces and parks and greater amenity and retail provision are most closely associated with better health, wellbeing and education outcomes. Providing these characteristics on sites will not be the only factor in the health, wellbeing and education outcomes, however, this analysis does show that they are likely to be a direct or indirect contributing factor in better outcomes.



1 Introduction

1.1. Background and purpose

The current UK Government have ambitious targets around housebuilding intending to build 1.5 million new homes in England over the course of this parliament. However, new residential developments must go beyond simply providing housing. The focus needs to be on creating sustainable, well-designed communities that enhance quality of life, well-being and long-term liveability for residents.

The University College of Estate Management (UCEM) currently have a programme of events and initiatives around 'place building' to explore the factors involved in creating great places to live. Place building is defined as essentially the creation of place-based, vibrant, walkable and sustainable communities which promote better education and health outcomes for residents, amongst other benefits. For continuity, in this report, we will refer to 'place building' rather than placemaking.

This report considers the impact of place building in new build developments on the health, wellbeing and educational outcomes of their residents. Many factors are known to affect health, wellbeing and educational outcomes, such as income, social status, social support network, genetics and physical environment (as identified by the World Health Organization). This is what social scientists might term a 'wicked problem', the dynamics in question are emerging, open to contextual interpretation and interconnected. It is, therefore, difficult or impossible to distinguish between factors affecting outcomes (themselves undefined, with no clear end point). As a result, this research only proffers a starting point to explore the impact of place building and provides an analytical basis from which future studies can build.

The research takes a desk based, data-centred approach to investigate the key trends and relationships across 71 sites where new homes have been built in England, Wales and Scotland. It forms the first part of research work commissioned by UCEM in their place building programme and is likely to be followed by more in-depth survey work to investigate the trends and relationships further.

1.2. Research approach and report structure

To assess the impact of new build developments on the health, wellbeing and educational outcomes of residents, we have first identified appropriate sites to study and their characteristics. We have then outlined how we have calculated a place score for each site. This is set out in Section 2.

In Section 3, we have assessed the health and wellbeing metrics for each site and identified any trends in the place score for the sites and health and wellbeing outcomes of residents. In Section 4 we have assessed the performance of pupils in schools located on the sites and identified any trends in the place score for the sites and education outcomes of pupils at the schools on the sites.

In both sections we have identified features and characteristics of the sites which are likely to have the greatest influence on the outcomes of residents. Subsequently, in Section 5, we have drawn together the findings from both the health and wellbeing and education analysis to identify any shared trends in outcomes relative to characteristics of place. We also outline the key recommendations for policy makers, landowners and developers in response to the findings of this work.

2 Sites, their characteristics and place building elements

For this analysis, we have identified 71 residential sites across England, Wales, and Scotland. These sites are located on the edge of existing urban areas or within new settlements and meet the following criteria: they involve the development of at least 1,000 homes and are relatively established, having been delivering homes for at least the past 5 to 10 years.

The sites are located in a range of markets with varying degrees of place building. We have examined the characteristics of each site and given them a place score based on 12 different elements (aiming to identify which sites have greater levels of sustainability, access to jobs, walkability, community, amenities and retail offer, a greater vision and stewardship and are in greater demand relative to their local area). This has then enabled us to compare the level of place building to the health, wellbeing and education outcomes of residents on the sites.

A key observation is that on the vast majority of sites the population is younger, and incomes are higher than the local authority average – factors which result in residents typically being in better health. Although there is no clear correlation between place score and income, higher quality sites with better place building tend to attract higher earning residents who are more likely to have better health and ensure better education for their children. Additionally, the proportion of affordable housing on the sites has been measured and considered to assess if it has an impact on the results.



2.1. Identification of sites to study

For this analysis, we have identified 71 residential sites across England, Wales, and Scotland. These sites are located on the edge of existing urban areas or within new settlements, they involve the development of at least 1,000 homes and are relatively established, having been delivering homes for at least the past 5 to 10 years. We have ensured there are sites from across the country in high and low value markets, albeit we are limited by where these large sites have been built.

The 71 sites chosen to be studied were refined down from 212 potential candidate sites identified using Glenigan planning records, new build sales data and Local Authority housing monitor reports. Sites from this long list were excluded where there was not enough data available for the various metrics used (i.e. not enough of the site had been built to have enough households living there yet), and where the administrative boundaries did not allow the sites to be isolated from the existing homes in the local area.

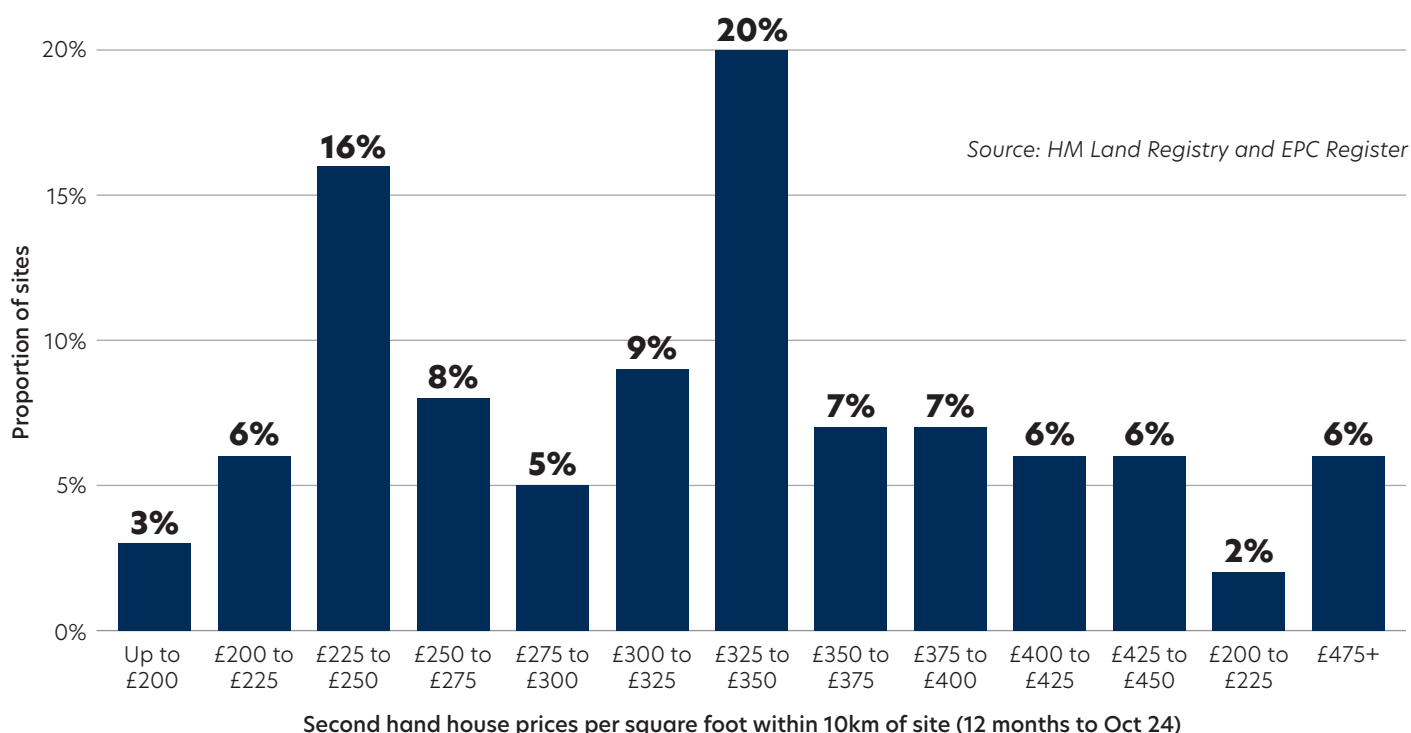
Some of these sites have been used for all the subsequent health, wellbeing and education analysis, while others have only been used for some of the measures, for example, because they do not include a school, or they are too small.

The 71 sites used for this study are shown on the map below and cover all parts of England, Wales and Scotland. The sites also cover a broad range of markets, as shown in the chart. Studying a broad distribution of sites means we have been able to avoid identifying trends that might only apply to localised areas or those in higher or lower value markets.

Figure 1 – Location of study sites



Figure 2 - Range of house prices in the markets where the study sites are located

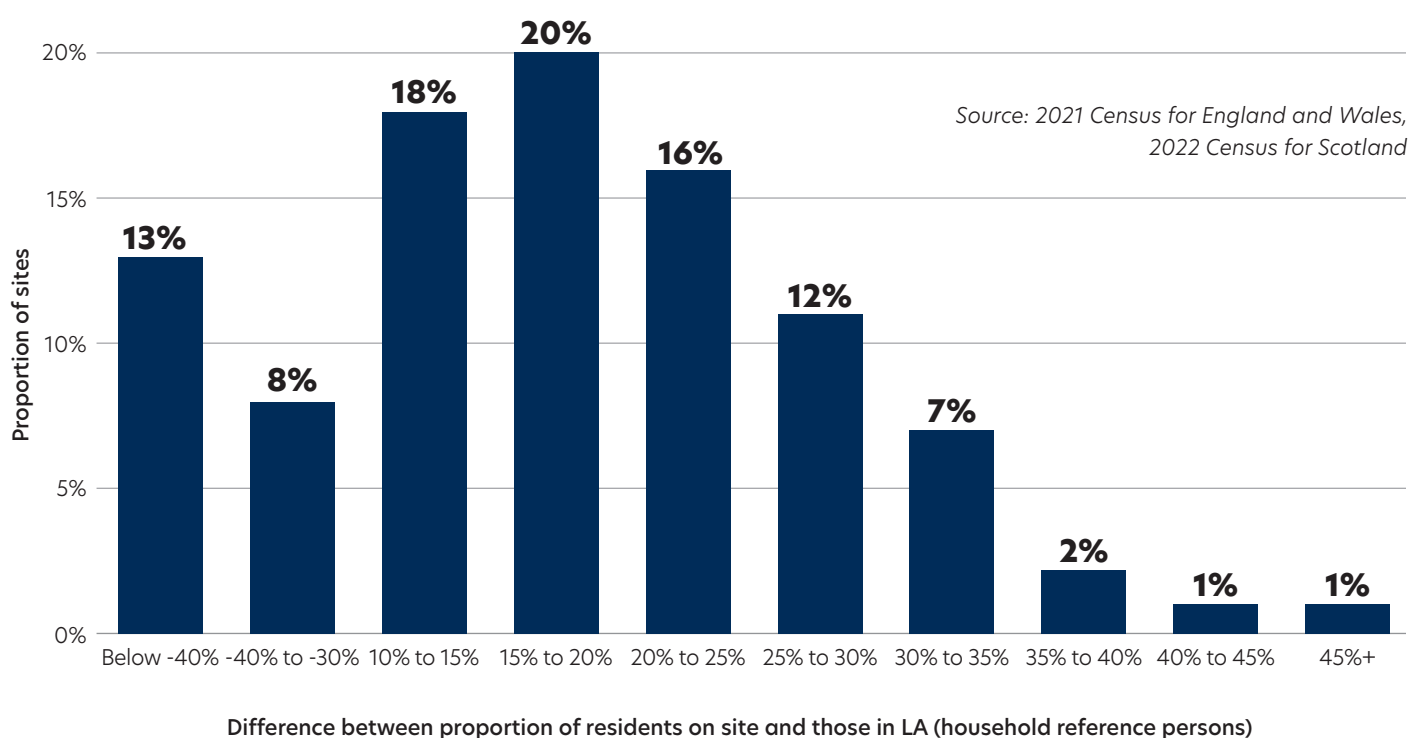


2.2. Characteristics of sites

To account for the impact of tenure, age, income and type of home we have analysed these measures for each site using Census and Experian demographic data.

On most sites, between 8% and 28% of homes built are affordable tenures (the average is 18%). Where appropriate in the analysis, we have split out sites by higher and lower levels of affordable housing to test if it is influencing the results.

Figure 3 - Range of affordable housing built on study sites



On the vast majority of sites, the population is younger, and incomes are higher than the local authority (LA) average, as shown on the charts

below. These are both factors which result in residents typically being in better health.

Figure 4 - Differences in age of those living on study sites compared to the local area

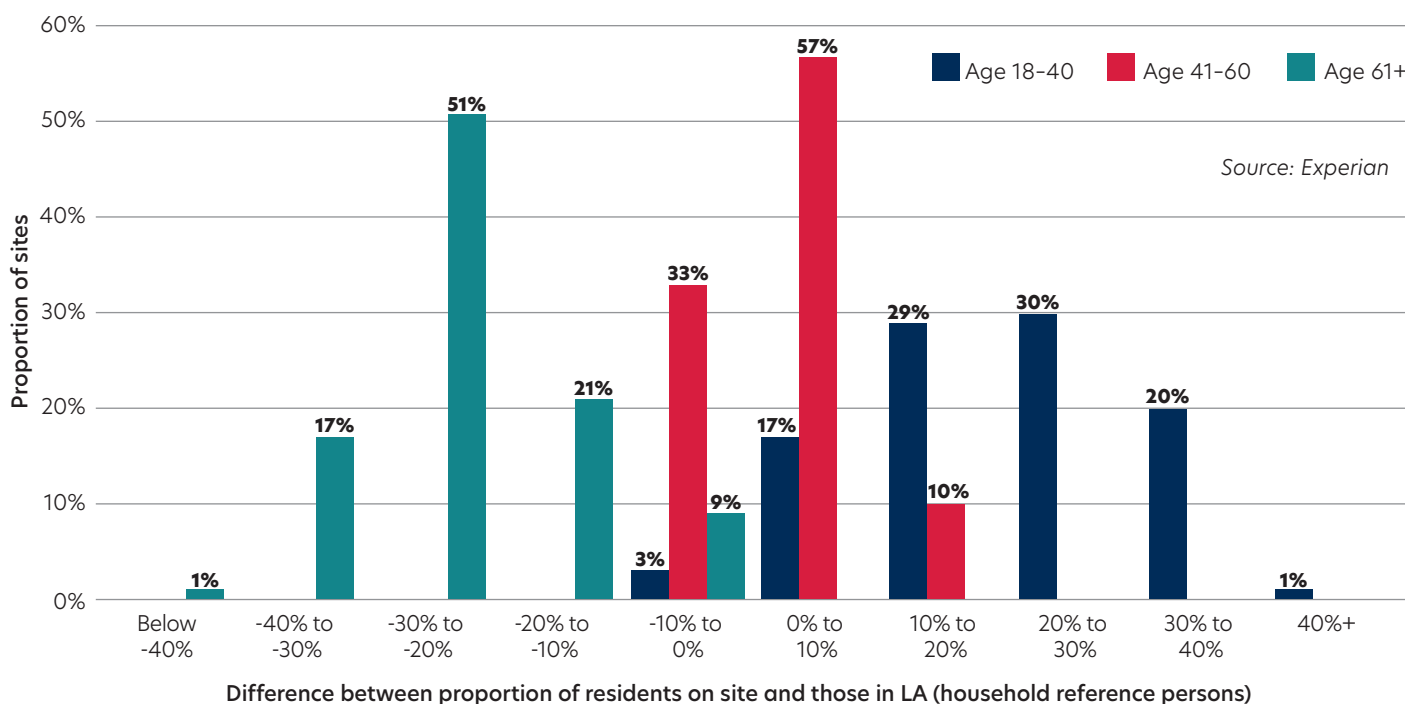
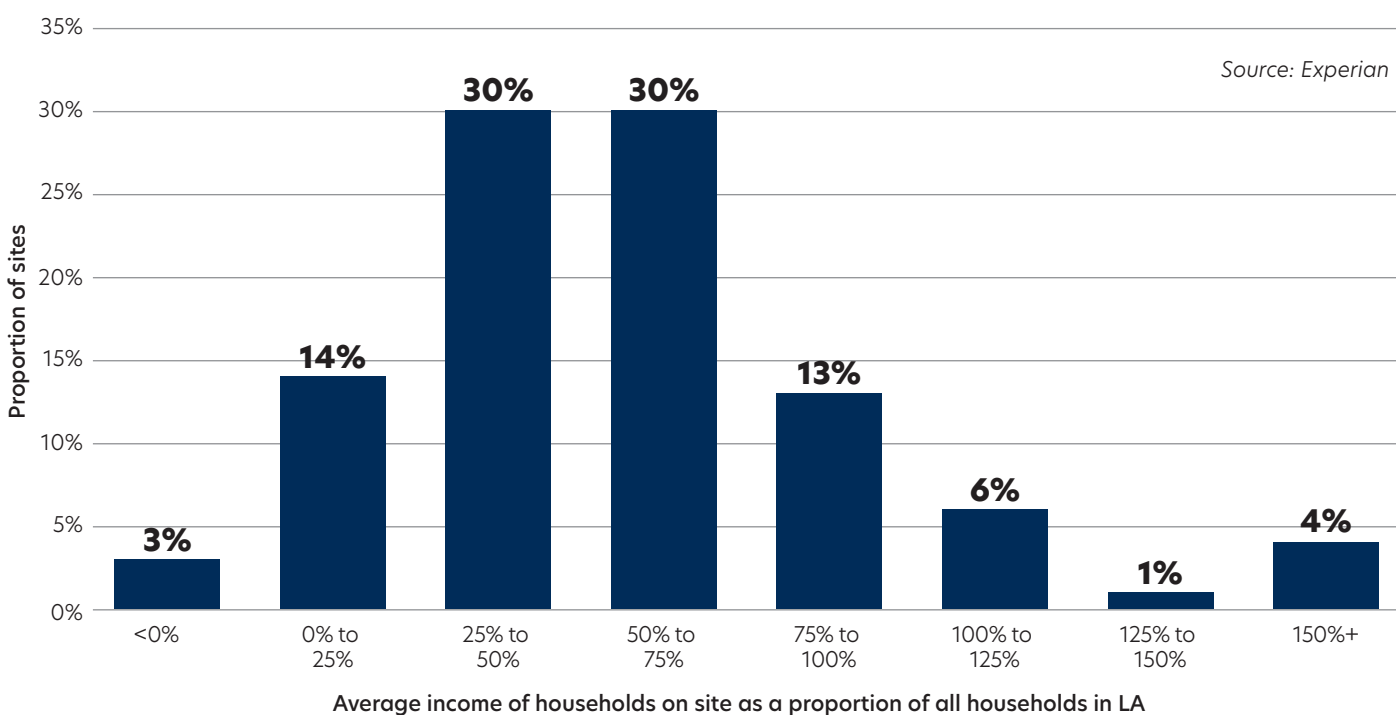


Figure 5 - Differences in incomes of those living on study sites compared to the local area



Houses dominate the sites studied due to the nature of those chosen, making up 85% of all homes on average. Typically, the houses are detached or semi-detached (making up 33% and 31% of homes on average), with terraces making up a fifth (21%) of homes. Three-bed homes dominate the sites, averaging 37% of all homes on

sites, with a further 32% being 4 or more beds and 26% 2 beds on average. Although there is some variation across the sites, the type of homes is fairly similar, and we have assumed it is unlikely to be a significant factor in the differences observed in the health, wellbeing and education metrics.

Figure 6 - Range of home types on study sites

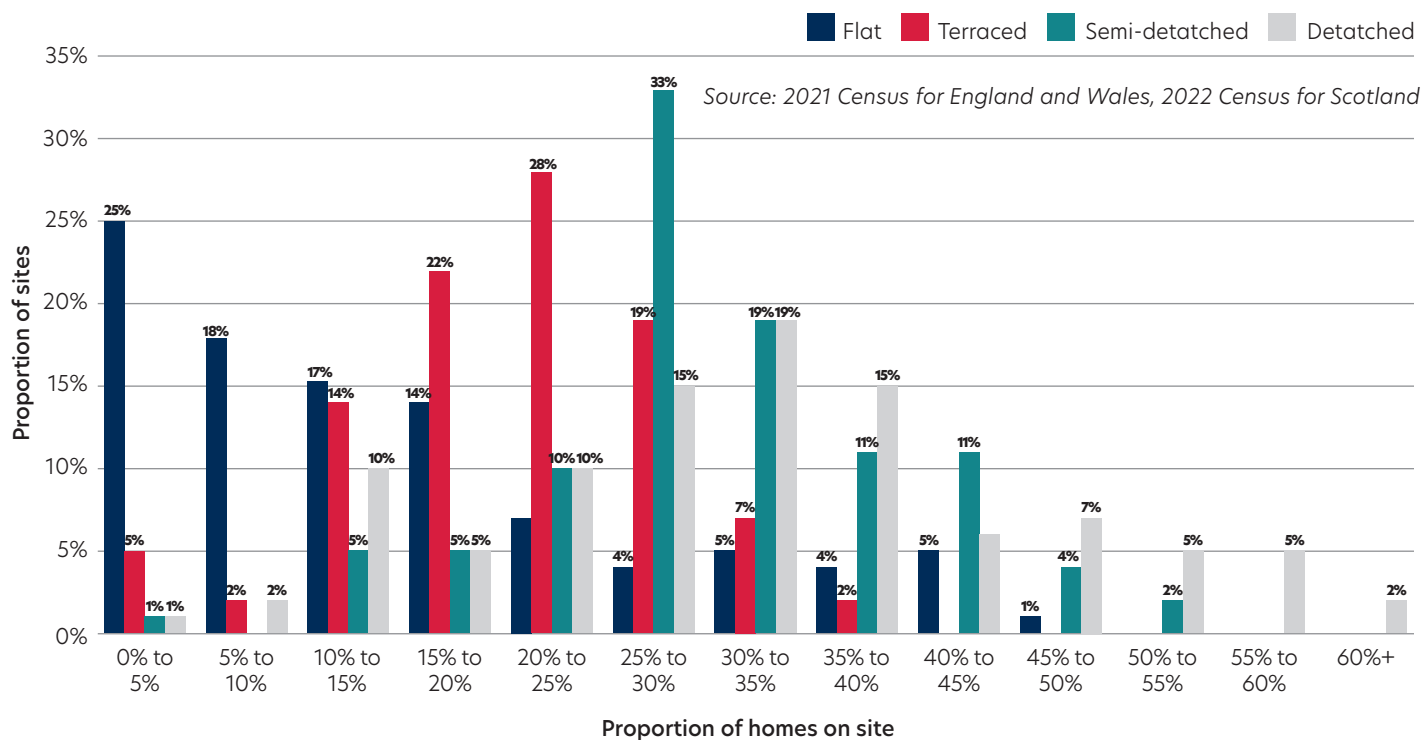
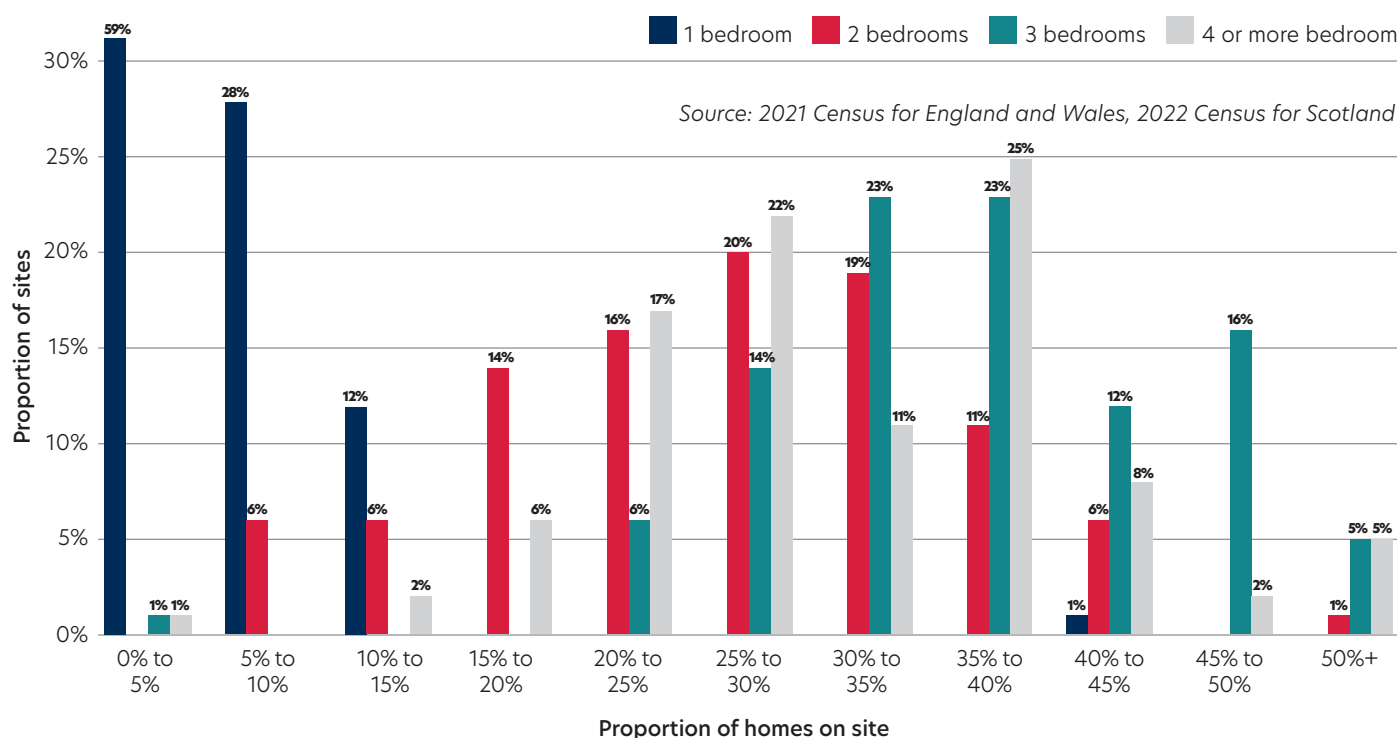


Figure 7 - Range of home sizes on study sites



2.3. Place score

To be able to compare the health, wellbeing and education outcomes on sites with different characteristics, we have given each site a place score as a way to indicate the level of place building at the site. Place building can be measured in various ways and is subjective. In this work, we have tried to use a more quantitative approach where possible and created a scoring system to analyse and compare the different sites on different measures which typically reflect good place building.

The place score generated aims to show which sites have greater levels of sustainability, access to jobs, walkability, community, amenities and retail offer, have a greater vision and stewardship and are in greater demand relative to their local area. It is calculated from a combination of 12 elements weighted to ensure an even balance of factors.

On this measure, a location with a high place score (and better place building) is one with:

- good access to jobs
- good public transport links
- walking or cycling
- low levels of commuting by car
- a strong vision (clear communication of what the place will become once the development is complete)
- master developer-led vision (strong stewardship with long-term interest in making the site work)
- lots of green walking routes, good quality parks and allotments
- a high-quality walkable, inviting streetscape
- significant community infrastructure and events and activities for residents
- significant amount of amenity
- significant retail provision to provide a mix of uses on site
- significant education facilities including nurseries, primary and secondary schools
- strong demand from buyers, with second-hand homes on site selling for more than those in the local area.



The elements we have used to create the place score are outlined in Table 1, along with the weightings we have given each element.

Table 1 - Explanation of the place building elements used to calculate the place score for each site

Element	Weighting	Considerations/ factors	Sources	Example of high high-scoring site	Example of low low-scoring site
Proximity to jobs	0.5	Proportion of residents working within 10km of site (not working at home)	Census	Over 70% of residents work within 10km of the site.	Under 40% of residents work within 10km of the site.
Sustainable travel options	1	Proportion of residents commuting to work by public transport Proportion of residents commuting to work on foot or by bicycle	2022 Experian Census estimates	Over 15% of residents commute to work by public transport, or a high proportion (over 20%) commute by foot or bicycle.	Under 3% of residents commute to work by public transport, or under 5% commute on foot or by bicycle.
Car reliance	0.5	Proportion of residents commuting to work by car	2022 Experian Census estimates	Under 65% of residents commute to work by car.	Over 85% of residents commute to work by car.
Master developer and vision	1	Masterplan for the site Master developer Type of master developer Landowner with long-term interest The vision for the site and how that is portrayed (e.g. website with strong messaging)	Various, including site websites, planning information	Site master planned by master developer and/or landowner with long-term interest working with quality builders to build the homes. Engaging website for site portraying a clear vision for the place	Site built by a consortium of builders without any joined-up or long-term vision.
Green spaces and parks	1	Green walking routes Small and large parks Sports pitches Allotments Accessible green space and walks	Various, including land use geospatial data, satellite imagery, masterplans	There are lots of green walking routes throughout the site, plenty of sports pitches and allotments. There are well-maintained parks and longer walking routes in extensive parkland and woodland.	There are very few green spaces. Those provided are inaccessible or of poor quality.
Streetscape	1	Variety of homes on street Quality of homes Street trees and planting Street furniture Pedestrian routes (inviting pavements and paths)	Various, including satellite imagery, Google Street View, site visits	Complementary range of styles and types of homes on street. Trees and well-maintained planting along key street scenes, wide pavements protected from parking/ roadways. Inviting well-lit open routes with clear wayfinding designs.	Narrow pavements with cars often parked on them. No obvious routes through on foot and no differentiation in the street scene or facades, making it difficult to wayfind and uninviting to walk down.
Community infrastructure	0.5	Community centres Sports facilities Play areas Places of worship	Various, including OS address base data, Google Maps	There is a range of community facilities including a community centre, lots of sports pitches, courts and a trim trail/ adult outdoor exercise apparatus. In addition, there is a range of play areas for all ages, as well as allotments and places of worship.	There are no community, play or sports facilities.

Table 1 – Explanation of the place building elements used to calculate the place score for each site – Cont'd

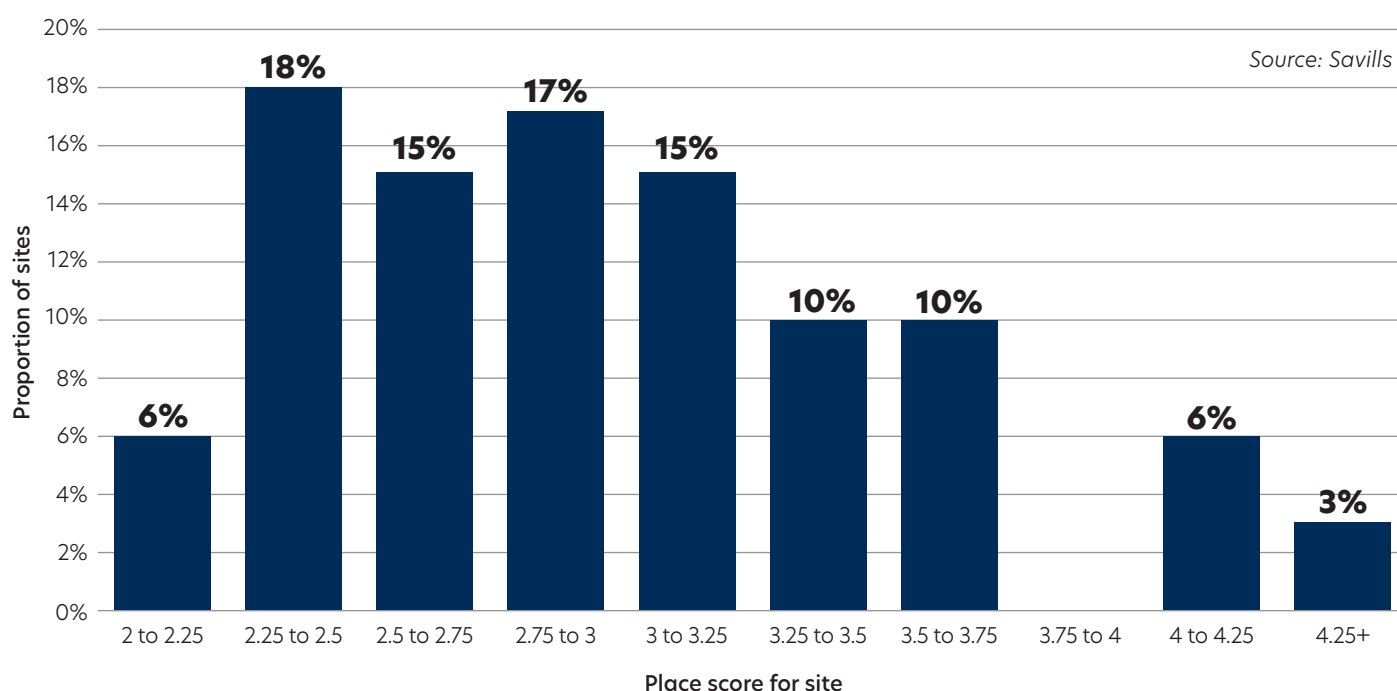
Element	Weighting	Considerations/ factors	Sources	Example of high high-scoring site	Example of low low-scoring site
Community engagement and events	0.5	Residents association Activities and events on an ongoing basis Community group (e.g. Facebook residents' group) Community engagement officer	Various, including site and community centre websites, Facebook pages, parish websites, resident associations websites	There are lots of events for the community on the site and regular classes in the community hall for all ages. Facebook pages and websites are up to date and welcoming. Regular community newsletters.	No events or activities can be found on the site. Webpages for event listings are very out of date or have no information.
Amenities	1	Presence and quality of pubs, restaurants, health centres, pharmacies, leisure facilities, play facilities	Various, including OS address base data, Google Maps	There is a pub, health centre and pharmacy and space for children to play.	There are no amenity buildings or spaces on the site.
Retail	1	Presence and quality of shops of all types, including convenience stores, clothes shops Nature of shops (chain or independent)	Various, including OS address base data, Google Maps	A variety of independent shops and a good quality convenience store, enabling a weekly shop to be done.	There are no shops.
Education provision	1	Presence of nursery schools, primary schools and secondary schools	OS address base data	There are several nurseries, a primary school and a secondary school on the site.	There are no nurseries or schools on the site.
Demand	1	House prices on the site compared to the local area – difference between the second-hand values per square foot achieved for homes sold on the site, and those for similar-sized homes sold within 10km of the site in the last year (12 months to Oct-24)	HM Land Registry and EPC register	Second-hand homes sold on the site have higher values than those for similar-sized homes in the local area.	Second-hand homes sold on the site have much lower values than those for similar-sized homes in the local area.

Source: Savills

Each element is scored from 1-5, with 5 being the highest rating. The weighted average was calculated to give a place score between 1 and 5 for each site.

Just over half of the sites (56%) scored between 2 and 3, with the remaining scoring between 3 and 4.5.

Figure 8 – Range of place scores given to study sites



2.3.1. Limitations in measuring place building using the place score

The way we have scored these places means that established sites close to jobs score better than those that have been delivered with high-quality place building but are yet to become fully established. It therefore reflects what has been provided so far and the impact that has on residents' lives rather than what the site will provide and may become in the future.

The walkability of the site is likely to be important to health and wellbeing outcomes. We have measured this by using the proportion who walk and cycle to work and the extent of the green walking routes either provided on site or accessible from the site. We have also only been able to assess the quantity of retail and amenity offerings available on the site,

not how it is integrated within the sites and therefore how walkable and sustainable it is as a mixed-use development. However, a more detailed analysis of walkability and integration of uses on the site would be a beneficial next stage of work to explore these factors more fully.

The size of the site and provision in the wider local area have not been considered. But both of these will affect the amount of different retail and amenity provision which is appropriate on the site. Further analysis by size of site and local context would be needed to explore and account for this.

The level of community engagement has been estimated based on the provision of facilities and the events and activities found advertised online. However, this may not fully represent the level of community engagement and sense of community that residents feel. Therefore, further work would be needed to understand this measure more fully.

2.4. Other factors affecting health, wellbeing and education

We acknowledge that much of the work we have done finds correlations between the measures and doesn't necessarily indicate the cause – further work would be needed to investigate this more fully. A key observation is that on the vast majority of sites the population is younger, and incomes are higher than the local authority average – factors which result in them being likely to be in better health. Although there is no clear correlation between place score and income, higher quality sites tend to attract higher earning residents who are more likely to have better health and ensure better education for their children.

This may mean that the results we find in this research are an indirect contributing factor in better health, wellbeing and educational outcomes rather than a direct one, i.e. by creating a better place

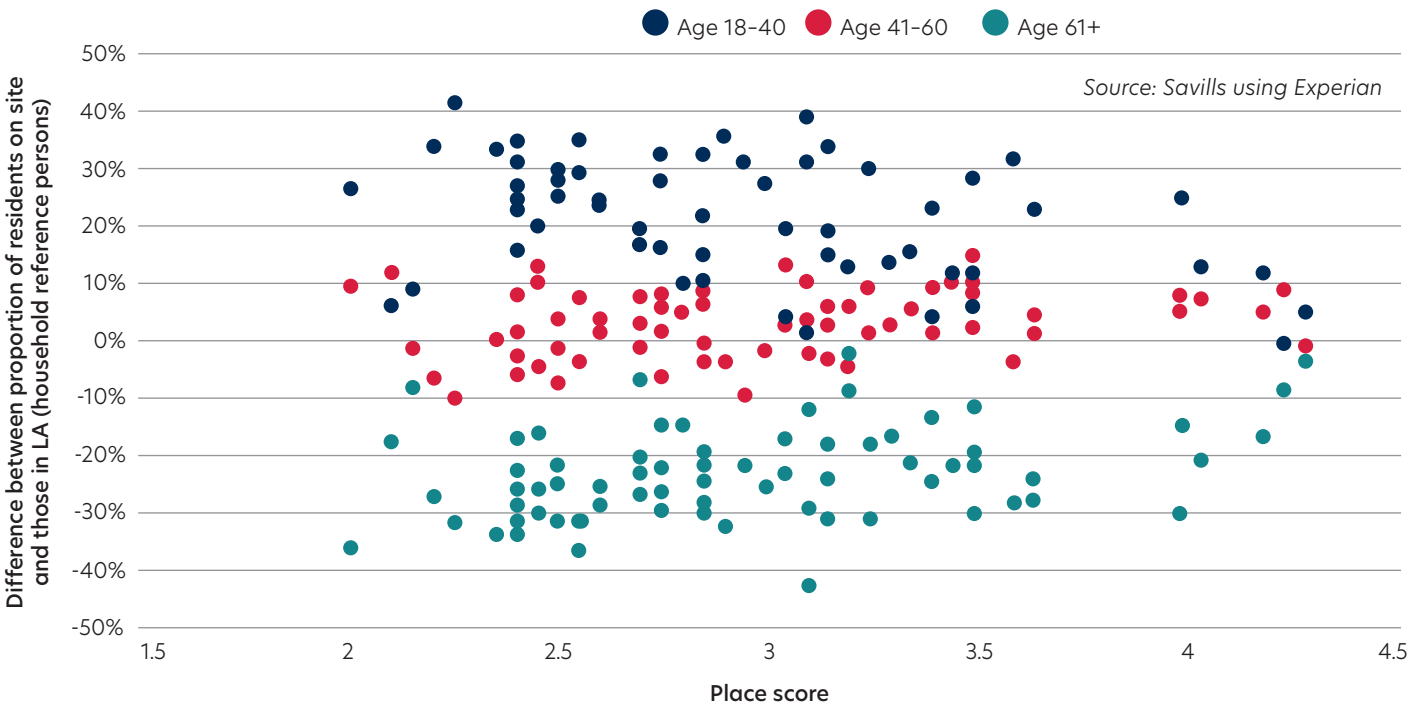
healthier people who enable better education outcomes for their children choose to move to the site, rather than the characteristics of the site directly causing better outcomes. Further work would be needed to test if this was the case.

New build sites tend to have a younger population

The following chart shows that those who live on the sites are much more commonly aged between 18 and 40 and far less commonly aged over 60 than the local authority average. By being younger, they are likely to be in better health. However, we also see from the chart that there is no clear trend with place score.

The elements we have used to create the place score are outlined in the table below, along with the weightings we have given each element.

Figure 9 - Age distribution of household reference person on sites relative to LA average by place score



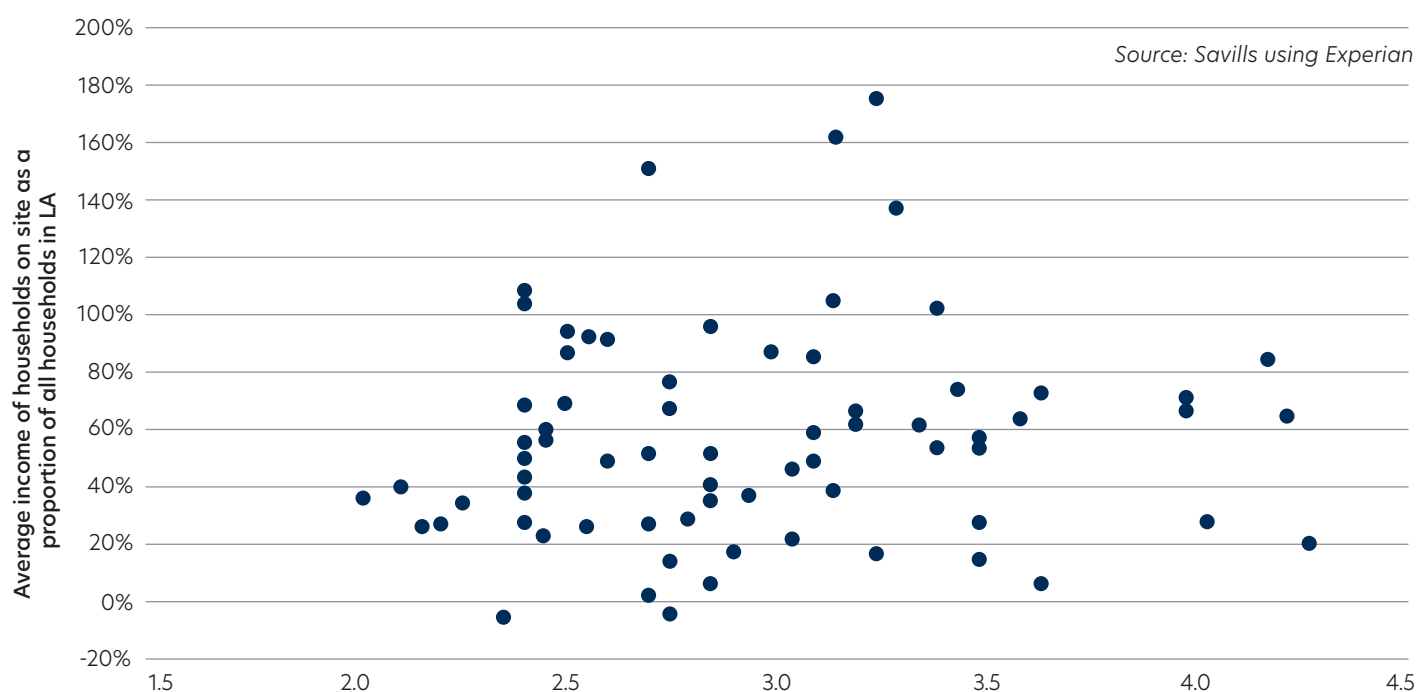
Residents on new build sites tend to have higher incomes

The following chart shows that those who live on new build sites have higher incomes than the local

authority average (sometimes significantly so). By having higher incomes, they are likely to be in better health and promote better education for their children. However, we also see there is no clear trend with place score.



Figure 10 - Income of households living on sites relative to the LA average by place score



3 Health, wellbeing and place building

Analysis of health and wellbeing metrics shows that residents on all the sites studied consider themselves to be in better health than the local area average. Although there is a lot of variation, this research shows that those who live on sites with a higher place score are more likely to have better health and wellbeing outcomes, even controlling for the tenure mix on the site. Sites with better place scores tend to be less deprived and have lower crime rates than their local areas. Relative to the local authority average, they also have fewer emergency hospital admissions, fewer deaths of under 75-year-olds and less child poverty and obesity.

The research suggests that sites with better health and wellbeing outcomes commonly have better green spaces and parks, a stronger vision (clear communication of what the place will become once the development is complete) and effective master planning and greater amenity and retail provision. Providing these characteristics on sites will not be the only factor affecting the health and wellbeing of residents; however, this analysis does show that they are likely to be a direct or indirect contributing factor.

Our key findings are:

1 Residents on all the new build development sites studied consider themselves to be in better health than the local area average.

2 Those who live on sites with greater place building are more likely to have better health and wellbeing outcomes. Sites with better place scores tend to:



3 Although there are lots of factors which affect health and wellbeing, this research shows that sites with better health and wellbeing outcomes commonly have:



3.1.Measuring health and wellbeing outcomes

To measure the health and wellbeing outcomes of different sites, we have used various datasets on residents available at different geographies. Some health data is available at small geographies whilst other health data is only available for larger geographies. Some of the sites studied are not large or established enough to be exclusively covered by a larger administrative area. Therefore, it has been

possible to analyse all the sites for some of the measures but only some of the sites for others. For this analysis, data at the Census geographies of output area (OA), lower super output area (LSOA) and middle super output area (MSOA) are used.

We have started at the most granular level, analysing the self-reported health levels of residents living on the sites in the latest Census. This data is available to the output area level (c.40-250 households) and therefore we can closely match the extent of the sites and assess this metric for all 71 of the sites.

We have then considered the Index of Multiple Deprivation (IMD) data to provide wellness indicators for IMD and crime available at LSOA level (c400-1,200 households). We have been able to assess 49 sites in this way.

Finally, we have considered health outcomes for those living on large established sites, examining death rates, levels of obesity in children and emergency hospital admissions data provided by the Department of Health and Social Care. This data is available at MSOA level (c.2,000 and 6,000 households) and therefore can only be robustly used to assess 7 large established sites when the geographic extent of the MSOAs matches the sites well (and does not include neighbouring homes).

3.2. Interaction of health and wellbeing outcomes with place

This analysis shows that residents on all the sites studied consider themselves to be in better health than the local area average. Although there is a lot of variation, those who live on sites with higher place

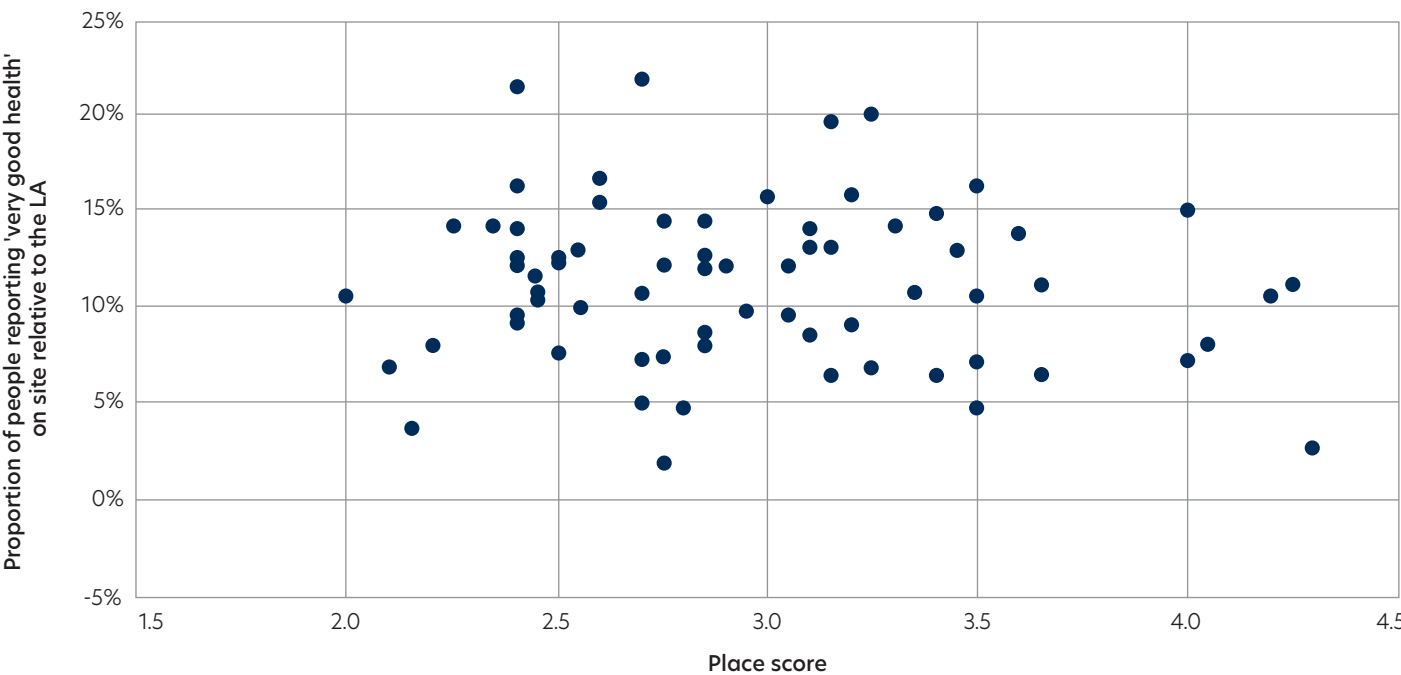
scores are more likely to have better health and wellbeing outcomes. Sites with better place scores tend to be less deprived and have lower crime rates than their local areas. They also have relatively fewer emergency hospital admissions, fewer deaths of under-75-year-olds and less child poverty and obesity.

3.2.1. Self-reported health levels

The latest Census asked respondents to rate their health. Using this data, we have been able to show that for 71 sites across England, Wales and Scotland, a greater proportion of residents reported being in 'very good health' than the local average. This shows that people who live on these sites feel they have better health than those who live elsewhere in the local area. As the scatter chart in Figure 11 shows, all sites have a measure above 0%, however, there is no distinction between sites with different place scores.

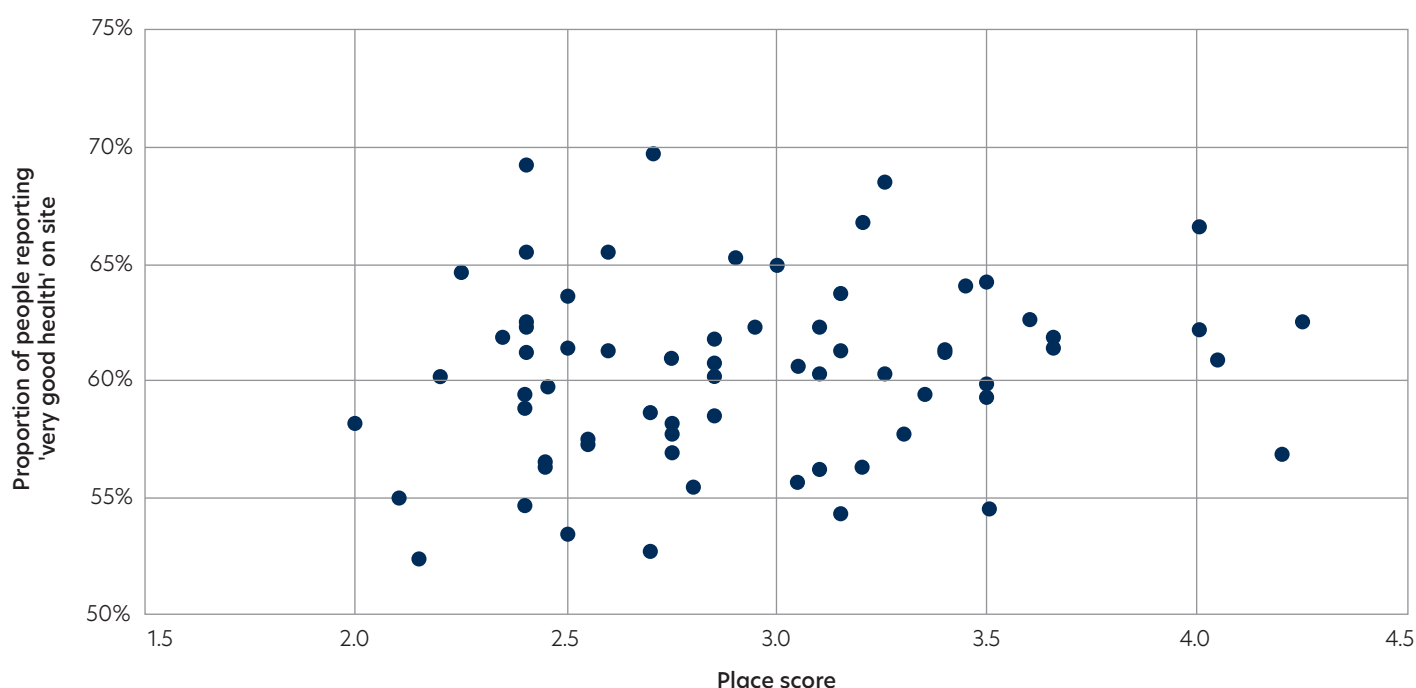
For additional context, as Figure 12 shows, 53-70% of residents on the sites studied report they are in 'very good health'.

Figure 11 - Place score relative to proportion of residents in 'very good health' above and beyond the LA average



Source: 2021 Census for England and Wales,
2022 Census for Scotland

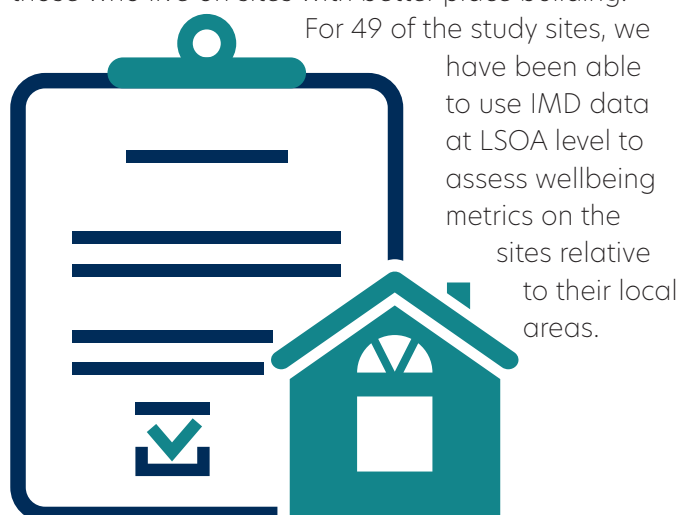
Figure 12 – Place score relative to proportion of residents in ‘very good health’



Source: 2021 Census for England and Wales,
2022 Census for Scotland

3.2.2. Wellbeing outcomes on sites

Wellbeing indicators show us that although the picture is mixed, sites with better place scores tend to be less deprived and have lower crime rates than their local areas. This means there are better wellbeing outcomes in terms of safety and deprivation (when compared to local norms) for those who live on sites with better place building.

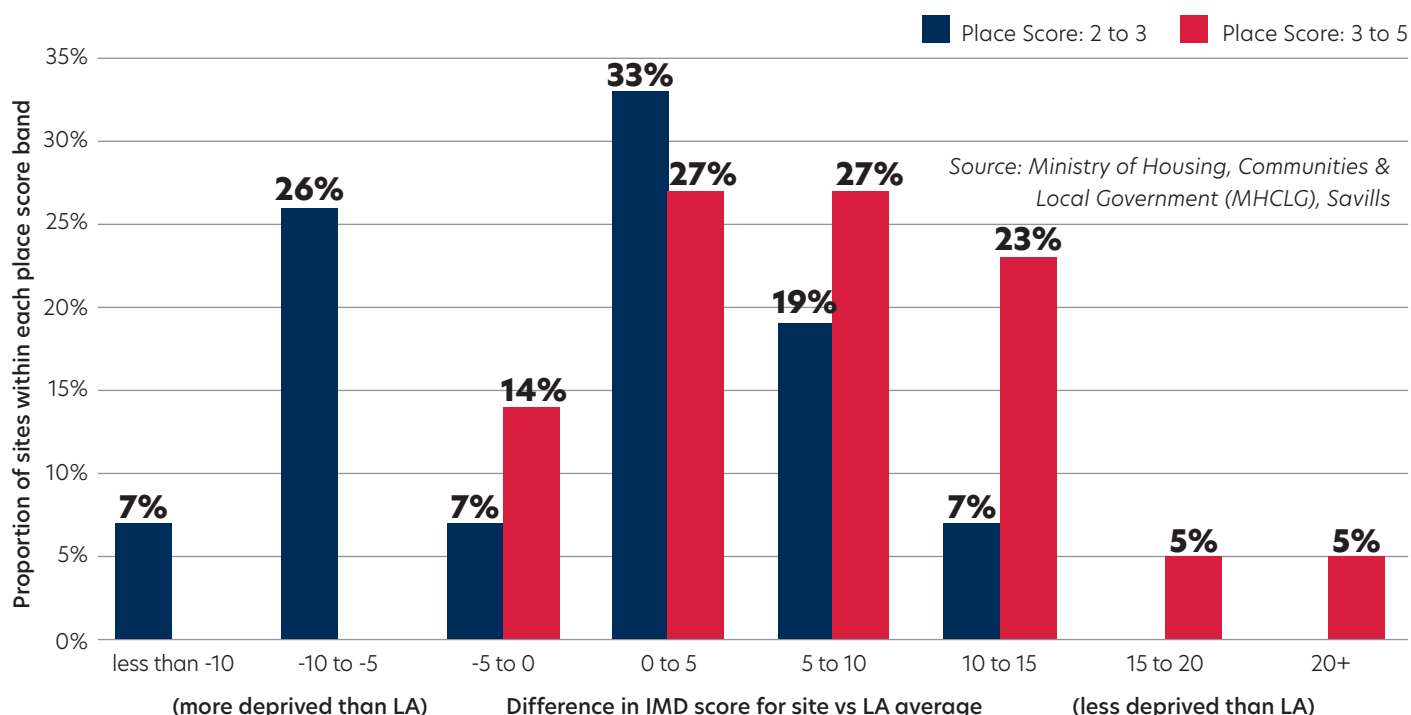


IMD

The index of multiple deprivation (IMD) is the official government measure of relative deprivation in England. It is based on 39 separate indicators and is calculated for each LSOA, with the most recent data available being for 2019. IMD is also available for Wales and Scotland, albeit they are calculated slightly differently. We found that sites with a higher place score are more likely to be less deprived than the local area. By contrast, it is only the sites with a lower place score which are more deprived than the local area. This shows that sites with poor place building are sometimes more deprived than their local areas, despite being new developments and having been built in a way to improve levels of local deprivation.

The Welsh and Scottish sites are less deprived than their local area averages, but because they use slightly different measures, we cannot directly compare them to the English sites on a like-for-like basis. We have been able to undertake the analysis for six sites across Wales and Scotland, but this is not a large enough sample to compare them within their own countries.

Figure 13 – Place score compared to relative IMD score

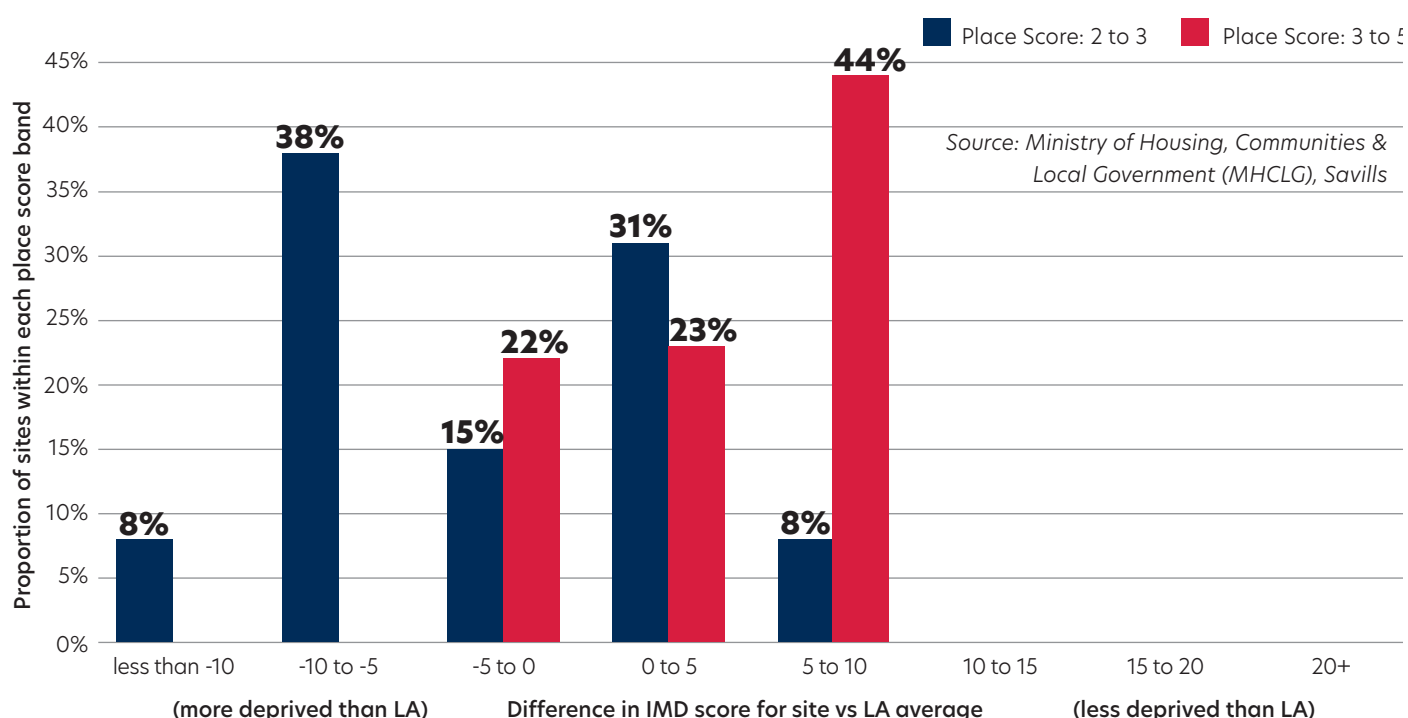


There is considerable variation in the proportion of affordable housing on the study sites, which may influence the IMD. As a result, we have tested whether the result of our analysis holds true for sites with high proportions of affordable homes. When we limit our analysis to sites with only high levels of affordable housing, we find very similar results.

Sites with high place scores are still relatively less deprived than their respective local authority averages.

The chart below shows an example of this, only including sites with more than 18% of homes being affordable.

Figure 14 – Place score compared to the relative IMD score for sites with more than 18% affordable housing

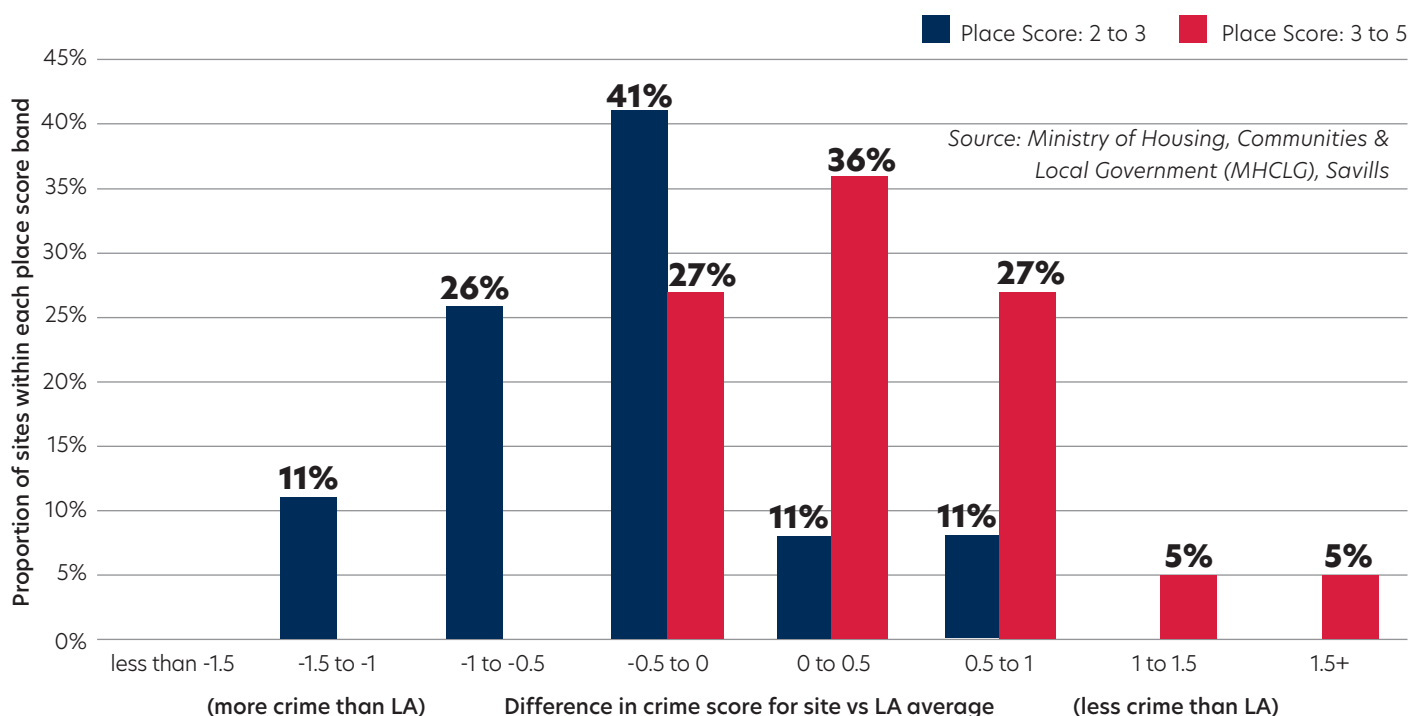


Crime

Crime levels are one of the metrics used to calculate the IMD score. We have specifically examined crime levels to assess if there is a relationship between relative levels of crime and place score. We find that sites with a higher

place score are more likely to have less crime than the local area. By contrast it is only the sites with a lower place score which have greater crime levels than the local area. Therefore, this shows that sites with better place building are safer and have less crime than their local areas, leading to better wellbeing for residents.

Figure 15 – Place score compared to relative crime levels



3.2.3. Health outcomes for those living on large established sites

Considering just the large established sites, there are better health outcomes (relative to the local area) for those living on sites with better place scores. For these large established sites we have studied (where the MSOA boundaries match the extent of the site well), we have been able to use local health data from the Department of Health and Social Care. Although the analysis is limited by the sample size, we have found there is a meaningful correlation between several key health measures for children and adults on the sites (relative to the local average) and the place score for those sites.

We find that for sites with better place scores, there are:

- relatively fewer emergency hospital admissions
- fewer deaths of under 75-year-olds
- fewer deaths from preventable causes among under-75-year-olds.

In addition, specifically for children, on sites with better place scores, there is:

- less child poverty
- less obesity in reception-aged children
- less obesity in children in year 6
- less prevalence of children being overweight in year 6.

For each of these measures, all the sites with a place score of more than 3 outperformed their LA average. This shows that there are better health outcomes for

residents on most of the study sites than those living in existing stock in the wider area.

Table 2 – Correlation of health measures relative to LA

Health measure	Correlation of site performance relative to LA average with place score (above 0.5 is significant)	Explanation
Emergency hospital admissions for all causes, all ages, standardised admission ratio	0.60	There are fewer emergency hospital admissions relative to the LA average on sites with better place scores.
Deaths from all causes, under 75 years, standardised mortality ratio	0.64	There are fewer deaths of under 75-year-olds relative to the LA average on sites with better place scores.
Deaths from causes considered preventable, under 75 years, standardised mortality ratio	0.64	There are fewer deaths of under 75-year-olds relative to the LA average on sites with better place scores.
Child Poverty, Income deprivation affecting children index (IDACI)	0.64	There are fewer deaths of under 75-year-olds relative to the LA average on sites with better place scores.
Reception prevalence of obesity (including severe obesity), 3 years data combined	0.58	There is less obesity in reception-aged children relative to the LA average on sites with better place scores.
Year 6 prevalence of obesity (including severe obesity), 3 years data combined	0.59	There is less obesity in children in year 6 relative to the LA average on sites with better place scores.
Year 6 prevalence of overweight (including obesity), 3 years data combined	0.67	There is less prevalence of children in year 6 being overweight relative to the LA average on sites with better place scores.

Source: Department of Health and Social Care, Savills

NB: This is based on an analysis of 7 established sites of the appropriate scale for MSOA data to be suitable.

The health measure for the site is compared to the LA average and this difference is correlated with the place score for the site to produce the correlation coefficient. A perfect correlation between the measures would result in a '1'; those over 0.5 are statistically significant, showing there is a meaningful correlation (relationship) between the two measures.

Limitations and characteristics of the sites

We appreciate that there are limitations to this analysis, as only seven of the sites studied have geographies suitable for analysis on this basis. However, we have tested some of the variables to challenge the results.

- **Affordable tenures:**

On three of the sites, between 5% and 10% of the homes are of an affordable tenure, whilst the other sites have between 12% and 30%. Removing the three sites with low affordable housing does not change the trends and correlations significantly. This indicates that differences in health outcomes are not solely driven by the proportion of affordable housing on site (and therefore differences in the needs of the resident population).

- **Type and size of home:**

All of the sites are dominated by houses, which make up 80-95% of the stock. All sites are also dominated by 3, 4 and 5 bed homes, which make up 60-82% of housing on the sites.

3.3. Characteristics of places with better health and wellbeing outcomes

Although there are lots of factors which affect health and wellbeing, this research shows the characteristics of the place are likely to play a part. Sites with better health and wellbeing outcomes commonly have better green spaces and parks, stronger vision and master planning and greater amenity and retail provision.

The elements of place building that are most closely correlated with places where there is high self-reporting of 'very good health' are typically sites which have:

- higher number of quality green spaces and parks
- stronger vision and master planning
- greater community engagement

The elements of place building that are most closely correlated with better wellbeing outcomes (IMD and crime measures) for residents on large established sites are typically sites which have:

- greater proximity to jobs
- higher number of quality green spaces and parks
- greater amenity and retail provision
- greater demand for homes

The elements of place building that are most closely correlated with better health outcomes for residents on large established sites are typically sites which have:

- greater use of public transport
- stronger vision and master planning
- greater amenity and retail provision

Providing these characteristics on sites will not be the only factor in supporting better health and wellbeing outcomes for residents, however, this analysis does show that they are likely to be a direct or indirect contributing factor.

4 Education and place building

Our analysis of attainment at KS2 and KS4 level shows that although there is a broad scatter, pupils tend to achieve better results at schools on sites where there is better place building. It is also more likely that schools on sites with better place building have an 'Outstanding' Ofsted rating.

For primary schools, sites with greater use of public transport, better green spaces and parks and greater amenity and retail provision are most closely associated with better education outcomes. For secondary schools, sites with stronger vision and master planning, better green spaces and parks, greater amenity and retail provision, and greater community engagement are most closely associated with better education outcomes.

Providing these characteristics on sites will not be the only factor in the success of pupils, however, this analysis does show that they are likely to be a direct or indirect contributing factor in better educational outcomes.

Our key findings are:

1 Schools on sites with greater place building are more likely to have an 'Outstanding' Ofsted rating

2 Pupils tend to achieve better results at schools on sites where there is greater place building. Schools on sites with a high place score are more likely to have (compared to the local education area):

a higher proportion of pupils reaching expected standards at KS2

a higher proportion of pupils reaching higher standards at KS2

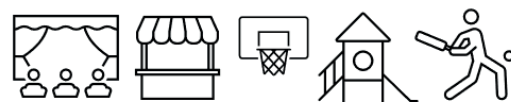
a higher proportion of disadvantaged pupils reaching expected standards at KS2



better attainment 8 score at GCSE

a higher proportion of pupils achieving grades 9-4 in English and Maths GCSEs

3 Although there are lots of factors which affect education, this research shows that sites with better health and wellbeing outcomes commonly have:



greater amenity and retail provision



stronger vision and master planning

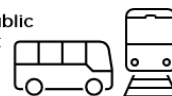


better green spaces and parks



greater community engagement

better public transport available



4.1. Measuring education outcomes

To measure the educational outcomes of those living on the study sites we have examined the performance of primary and secondary schools located on the sites. We have compared various metrics on education outcomes including attainment level at KS2 and KS4 for the schools on the sites to the average performance of schools in the local education area. This has allowed us to control for variation in education performance by geography

and remove any variation due to regional differences. In addition to achievement levels, we have also examined the Ofsted ratings of the schools.

The measures of educational outcomes (relative attainment levels) are compared with the place score for each site to assess if there is any correlation in performance of the school and its pupils with the level of place building on the site (place score). We have also considered the correlation between relative school performance and all the different components making up the place score to assess which place factors have the biggest influence.

This approach has enabled us to assess and compare 77 primary schools across 54 sites and 18 secondary schools across 16 sites in England. In addition, we have examined 2 primary schools in Wales and 4 primary schools in Scotland on two and four sites respectively. There are more schools on the study sites than this, but those that are not yet established due to only being opened in recent years do not have sufficient data on results and attainment to be compared and have therefore been excluded from the analysis.

4.1.1. Limitations

We have assumed that the majority of children attending the school and achieving the results recorded by the school live on the site. However, this may not be the case. Some children living in neighbouring areas may attend the school, and children living on the site might go to school elsewhere. This is a limitation of the work and further work examining catchment areas would be needed to examine this more thoroughly.

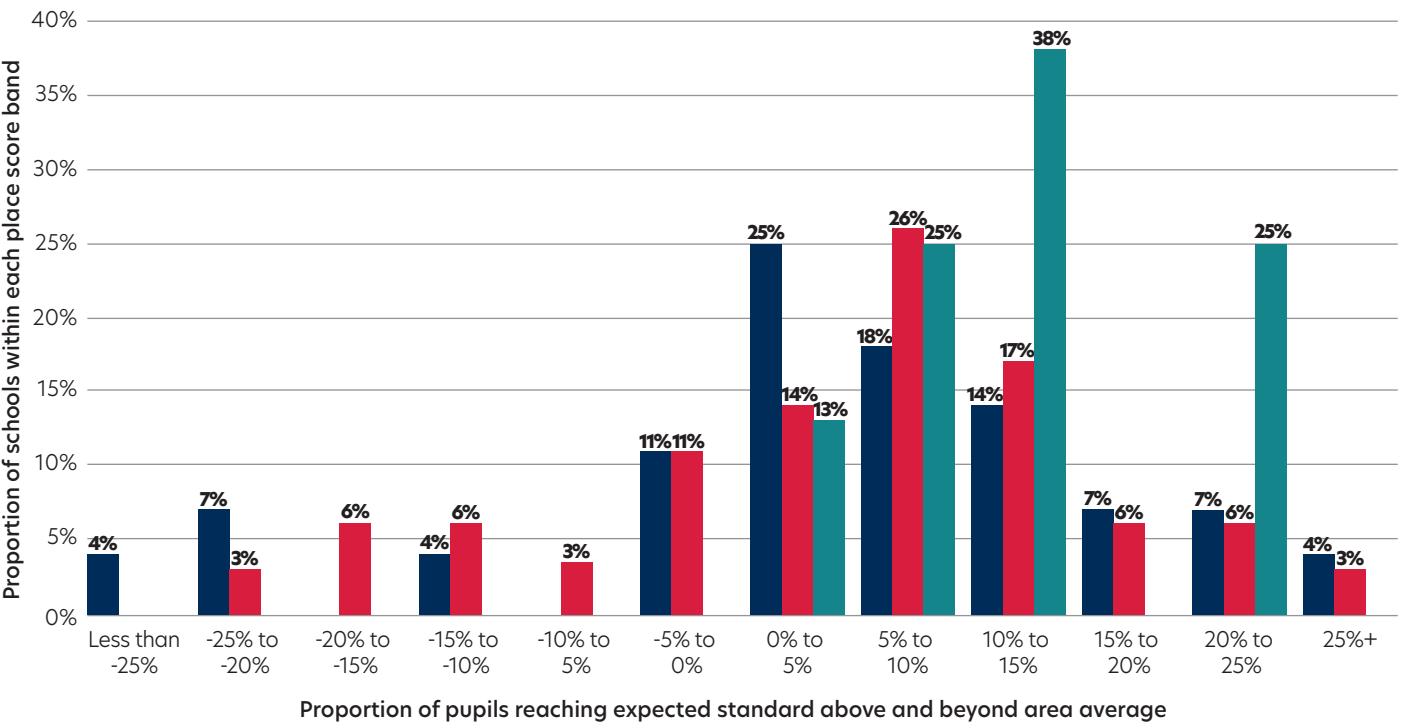
4.2. Interaction between education outcomes in primary schools and place building on sites

This analysis shows that although there is a broad scatter, all pupils (including disadvantaged pupils) tend to achieve better results at KS2 at schools on sites where there is better place building. It is also more likely that schools on sites with better place building have an ‘Outstanding’ Ofsted rating.

4.2.1. Proportion of pupils reaching expected standard at KS2

Primary schools in England are commonly measured on the proportion of pupils reaching the expected standard in reading, writing and maths at KS2. We find that primary schools on sites with a high place score usually have a higher proportion of pupils reaching the expected standards at KS2 than the local area. By contrast, schools on sites with a lower place score are more varied in their performance and are more likely to underperform the local area average on this measure.

Figure 16 – Place score compared to relative proportion of pupils reaching the expected standard at KS2



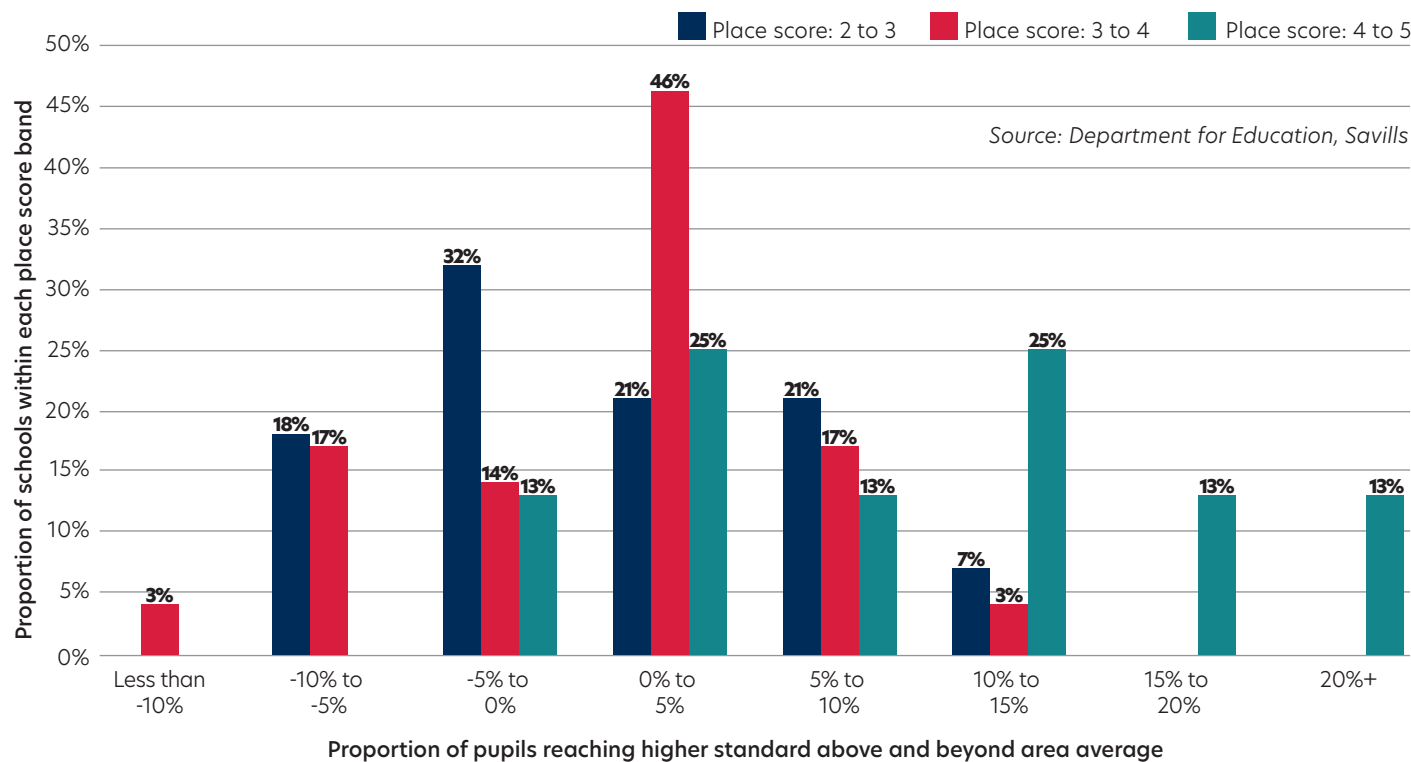
Source: Department for Education, Savills

4.2.2. Proportion of pupils reaching higher standard at KS2

Primary schools in England also record data on the proportion of pupils reaching a higher standard in reading, writing and maths at KS2. We find that

primary schools on sites with a high place score are more likely to have a higher proportion of pupils reaching higher standards at KS2 than the local area, with almost all sites with a place score of 4 or more scoring higher than their local area. By contrast, schools on sites with a lower place score show more varied performance and more commonly underperform compared with their local areas.

Figure 17 – Place score compared to relative proportion of pupils reaching higher standards at KS2



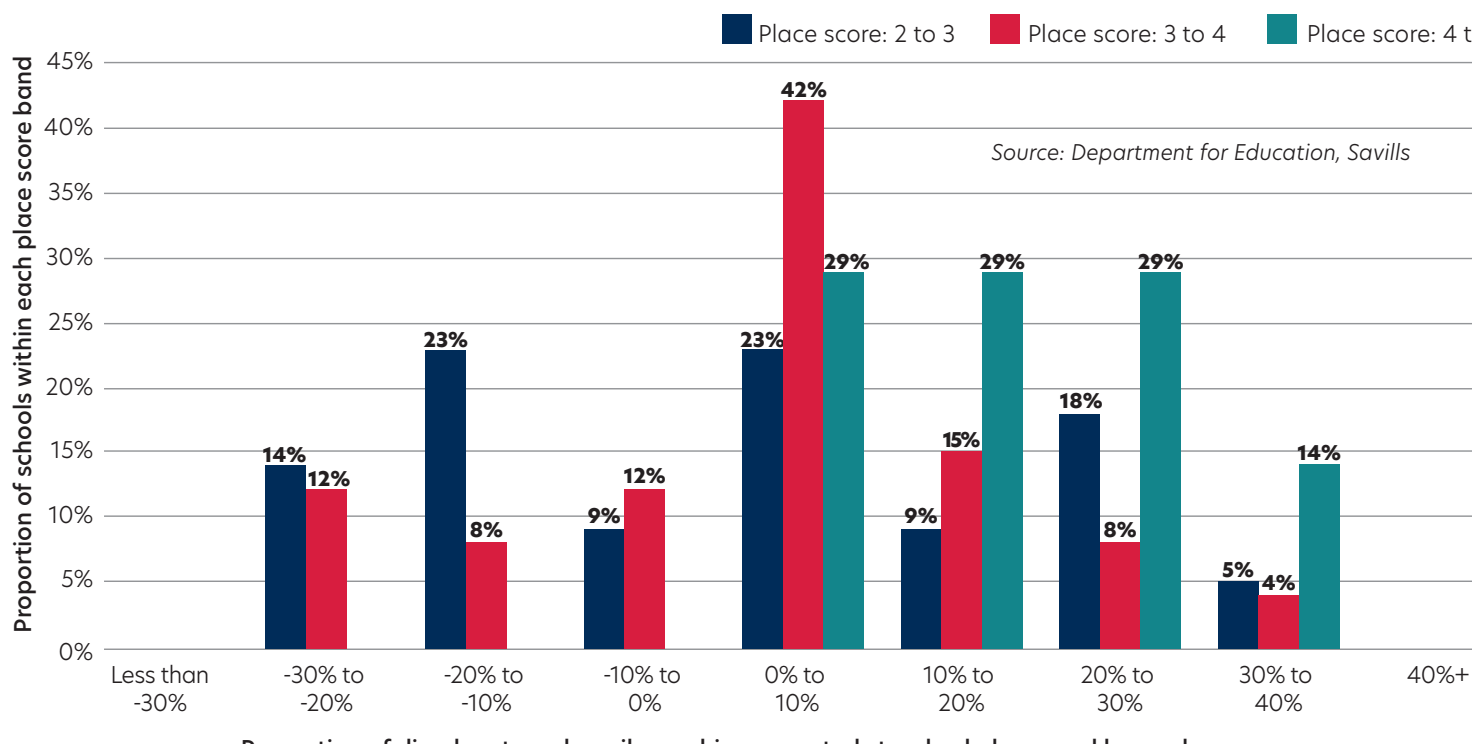
4.2.3. Disadvantaged pupils reaching expected standard at KS2

We have also analysed data looking at the proportion of disadvantaged pupils reaching the expected standards in reading, writing and maths at KS2. This is a standard measure for schools where disadvantaged pupils are ordinarily defined as: those who were registered as eligible for free school meals at any point in the last six years, children looked after

by a local authority or have left local authority care in England and Wales through adoption, a special guardianship order, a residence order or a child arrangements order.

We found that primary schools on sites with a high place score are more likely to have a higher proportion of disadvantaged pupils reaching expected standards at KS2 than the local area. By contrast, schools on sites with a lower place score are more likely to underperform the local area average on this measure.

Figure 18 - Place score compared to relative proportion of disadvantaged pupils reaching expected standards at KS2

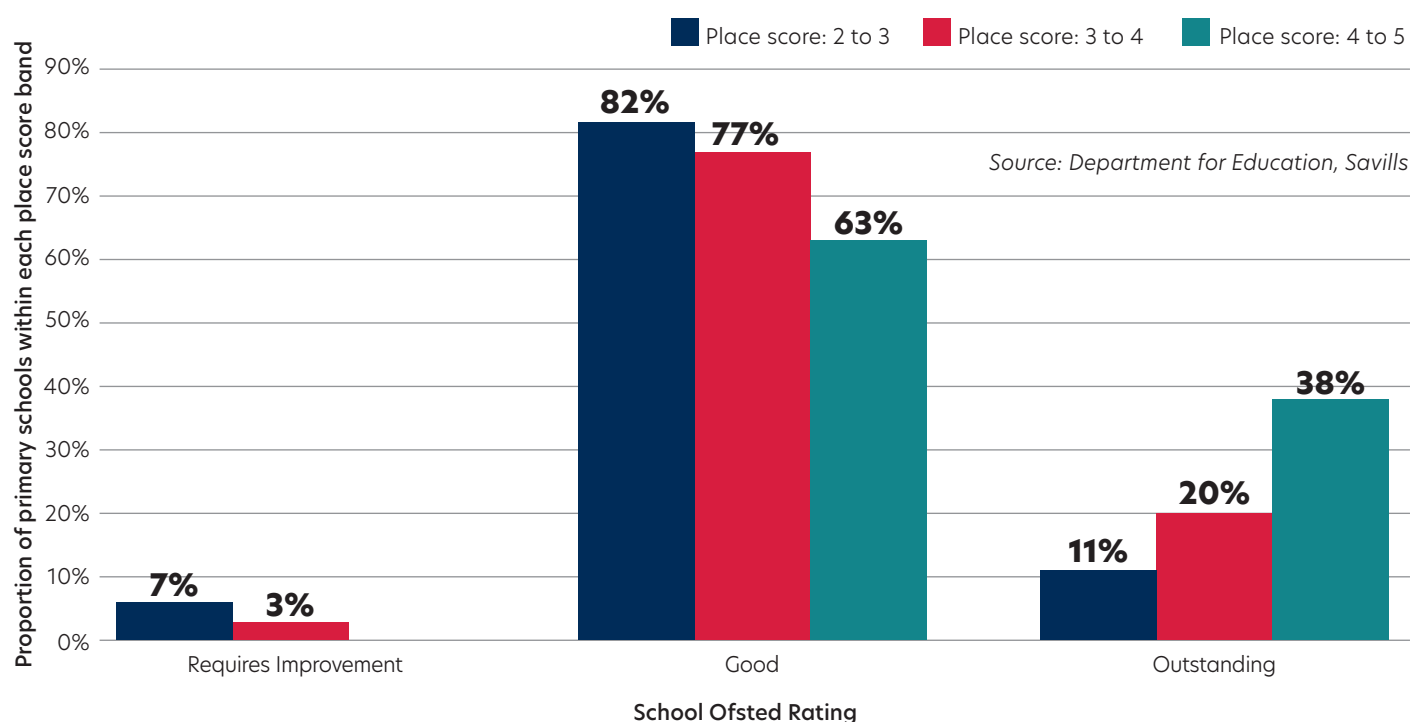


4.2.4. Ofsted rating

Ofsted ratings are another key metric against which schools in England are measured. Most primary schools on all types of sites are most likely to be rated 'Good'. However, we find that primary schools

on sites with a high place score are more likely to be rated 'Good' or 'Outstanding' than other sites. By contrast, schools on sites with a lower place score are more likely to be rated as 'Requires improvement', albeit there are only a small number which are categorised as such.

Figure 19 - Place score compared to Ofsted rating for primary schools on study sites



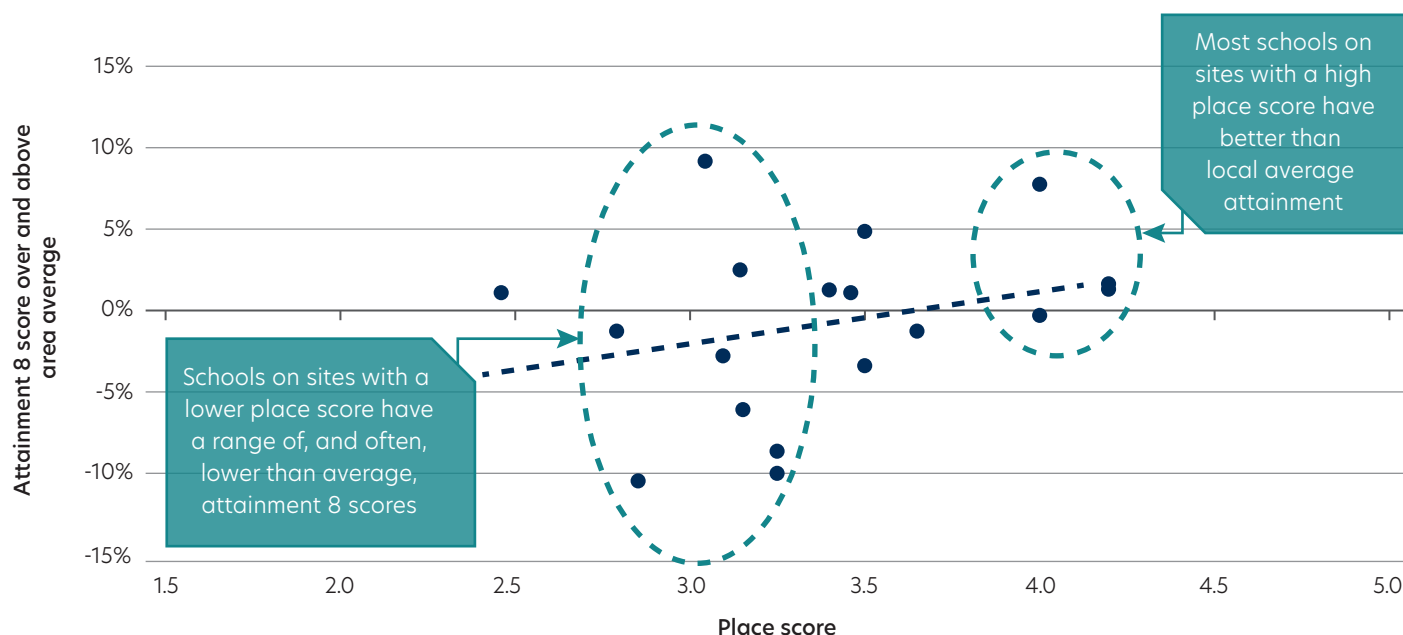
4.3. Interaction between education outcomes in secondary schools and place building on sites

At GCSE level, we have again found that pupils tend to achieve better results at secondary schools on sites where there is better place building. These schools are also more likely to be rated 'Good' or 'Outstanding' by Ofsted.

4.3.1. Attainment 8 score

Secondary schools in England are commonly measured by their Attainment 8 score. This is the average achievement of pupils in up to 8 qualifications at GCSE and English Baccalaureate, including English and Maths. We find that secondary schools on sites with a high place score have better Attainment 8 scores than the average for the Local Education Area. By contrast, schools on sites with a lower place score have a range of, and often lower, than the local average Attainment 8 score.

Figure 20 - Place score compared to relative Attainment 8 score at schools on study sites



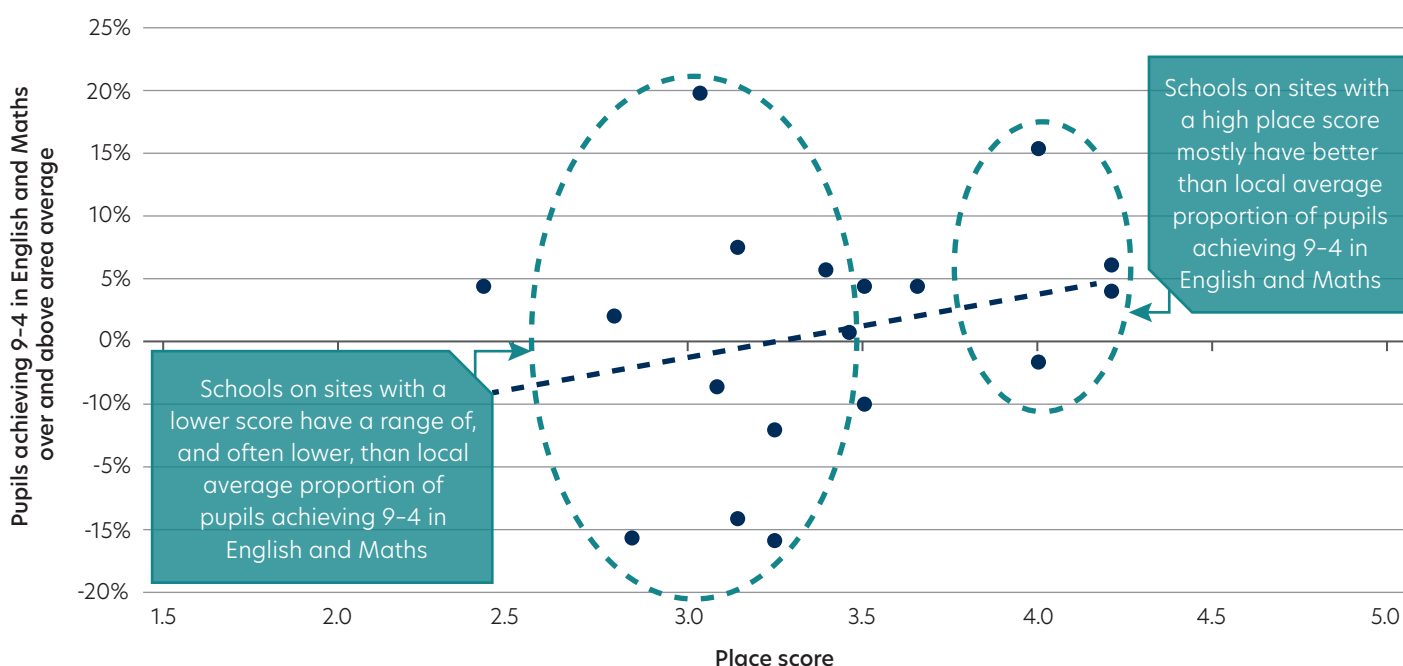
Source: Department for Education, Savills

4.3.2. Proportion of pupils achieving 9-4 in English and Maths GCSEs

Another key metric secondary schools in England are measured on is the proportion of pupils achieving grades 9-4 in English and Maths GCSEs. We found

that secondary schools on sites with a high place score perform better on this measure than the average for the Local Education Area. By contrast, schools on sites with a lower place score vary more significantly on this measure and more commonly have a lower proportion of pupils achieving grades 9-4 in English and Maths GCSEs than the local average.

Figure 21 – Place score compared to relative proportion of pupils achieving 9-4 in English and Maths GCSEs at schools on study sites



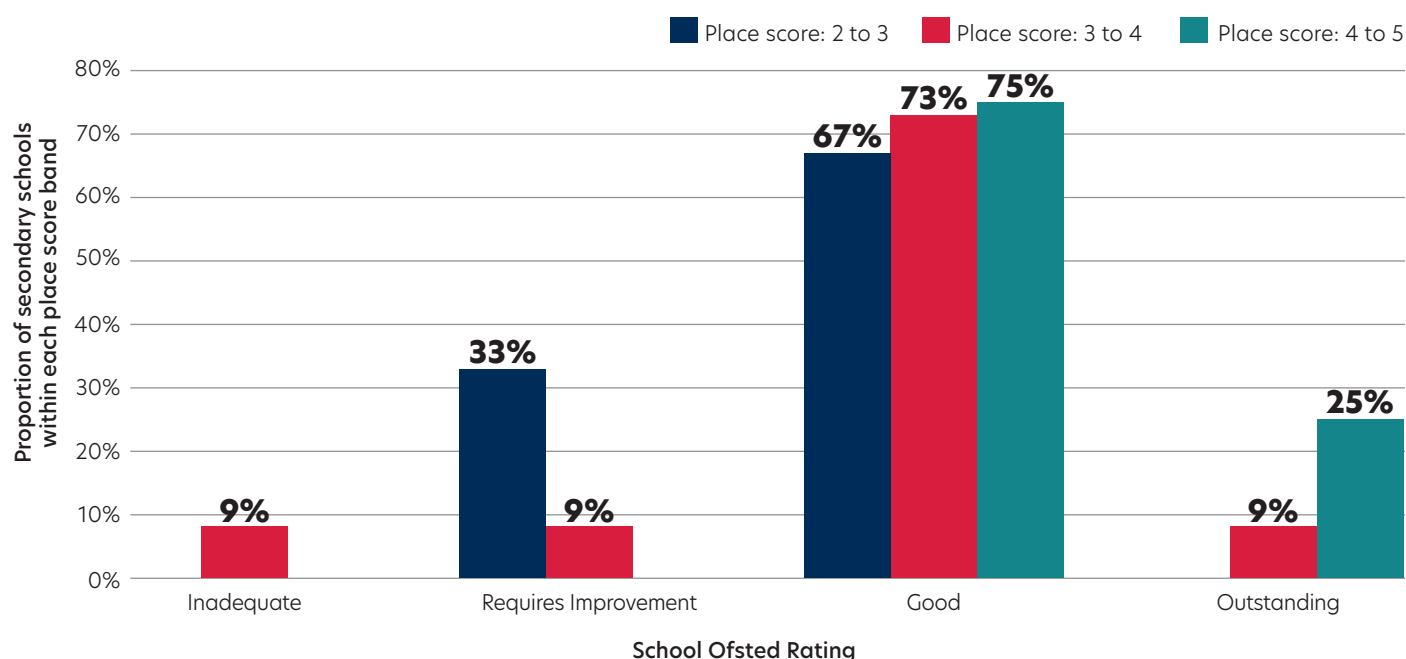
Source: Department for Education, Savills

4.3.3. Ofsted rating

Secondary schools show a similar pattern of Ofsted ratings to primary schools. Most secondary schools on all types of sites are most likely to be rated 'Good'.

However, we find that secondary schools on sites with a high place score are more likely to be rated 'Good' or 'Outstanding' than other sites. By contrast, schools on sites with a lower place score are more likely to be 'Inadequate' or 'Requires Improvement'.

Figure 22 – Place score compared to Ofsted rating for secondary schools on study sites



Source: Department for Education, Savills

4.4. Characteristics of places with good education outcomes

Although there are lots of factors which affect how good a school is and the outcomes of its pupils, this research shows that the characteristics of the place the pupils live may play a part in improving achievement at school. Generally, the schools on sites with better place building have been more likely to generate better attainment for their pupils (above and beyond the average for the local area) and have better Ofsted ratings at both primary and secondary level. By looking into the elements of place building that are most closely correlated with education outcomes we find the following characteristics are important for primary and secondary school pupil performance.

Typically, the primary schools with better attainment are on sites which have:

- greater use of public transport
- higher number of quality green spaces and parks
- greater amenity and retail provision

Typically, the secondary schools with better attainment are on sites which have:

- stronger vision and master planning
- higher number of quality green spaces and parks
- greater amenity and retail provision
- greater community engagement.

Providing these characteristics on sites will not be the only factor in the success of pupils, however, this analysis does show that they are likely to be a direct or indirect contributing factor in better educational outcomes.



5 Conclusions and recommendations

In summary, we find that typically there are better health, wellbeing and education outcomes for residents living on sites with greater levels of sustainability, access to jobs, walkability, community, amenities and retail offer, and sites which have a greater vision and stewardship and are in greater demand relative to their local area.

Sites with a stronger vision and master planning, better green spaces and parks and greater amenity and retail provision are most closely associated with better health, wellbeing and education outcomes. Providing these characteristics on sites will not be the only factor in the health, wellbeing and education outcomes, however, this analysis does show that they are likely to be a direct or indirect contributing factor in better outcomes.

Our key findings are:

1 Pupils tend to achieve better results at schools on sites where there is greater place building. Schools on sites with a high place score are more likely to have (vs the local education area):

- a higher proportion of pupils reaching expected standards at KS2
- a higher proportion of pupils reaching higher standards at KS2
- a higher proportion of disadvantaged pupils reaching expected standards at KS2
- better attainment 8 score at GCSE
- a higher proportion of pupils achieving grades 9-4 in English and Maths GCSEs

2 Those who live on sites with greater place building are more likely to have better health and wellbeing outcomes. Sites with better place scores tend to:

- Be less deprived
- Have less crime
- Have fewer emergency hospital admissions
- Have fewer deaths of under 75-year-olds
- Have less child poverty and obesity

3 Although there are lots of factors which affect outcomes, we find that sites with better health, wellbeing and educational outcomes commonly have:



5.1. Conclusions on health, wellbeing and education outcomes linked to place

Sites with a better place score tend to have better health, wellbeing and education outcomes for residents, albeit with some significant variation.

In terms of education we find that pupils tend to achieve better results at KS2 and KS4 at schools on sites where there is better place building. It is also more likely that schools on sites with better place building have an 'Outstanding' Ofsted rating. Sites with better place scores also tend to be less deprived and have lower crime rates than their local areas.

They also have relatively fewer emergency hospital admissions, fewer deaths of under-75-year-olds and less child poverty and obesity.

This means that typically there are better health, wellbeing and education outcomes for residents living on sites with greater levels of sustainability, access to jobs, walkability, community, amenities and retail offer, and sites which have a greater vision and stewardship and are in greater demand relative to their local area.

We find that sites with stronger vision and master planning, better green spaces and parks and greater amenity and retail provision are most closely associated with better health, wellbeing and

education outcomes. Providing these characteristics on sites will not be the only factor influencing health, wellbeing and education outcomes; however, this analysis does show that they are likely to be a direct or indirect contributing factor in better outcomes for residents.

On the vast majority of sites the population is younger, and incomes are higher than the local authority average – factors which result in residents typically being in better health. Although there is no clear correlation between place score and incomes, higher quality sites with better place building (and often higher values) tend to attract higher earning residents who are more likely to have better health and ensure better education for their children. We acknowledge that much of the work undertaken finds correlations (relationships) between the measures and doesn't necessarily indicate the cause – further work would be needed to investigate this more fully.

For each site and its setting, the nature of what constitutes the best place building will vary. The surrounding area and local provision will play a significant part as well as the size of the site and its context. For example, a site which has access to neighbouring public open space, such as nature reserves or woodland with public paths, could prioritise routes connecting into this existing network. It would not necessarily need as much green space provision on the site as a result. Similarly, the types of amenities and

retail options that may be appropriate will depend on the demographics and preferences of those living on and near the site, as well as ensuring they complement the wider local provision. Therefore, there is no one-size-fits-all solution to better place building, and it should not be treated as a tick box exercise.

Building new places, whether they are urban extensions or new settlements, provides a real opportunity to create communities where people thrive, not just locations where numerical housing targets are met. Creating great communities can make a real difference to people's lives and have a positive impact on their health and education outcomes. As shown by this research, the creation of mixed-use places with retail and amenity provision, promoting live-work-play environments, corresponds with better health, wellbeing and education outcomes.

5.2. Recommendations

This analysis provides context for further work into understanding the links between the type of places being created on new developments today, the level of place building and the impacts on health, wellbeing and education outcomes for those who live there. Although this work has its limitations and further work would be required to explore this further, there are some key recommendations we have drawn from the work for policy makers, landowners and developers.



5.2.1. Recommendations to policy makers

Not just numbers: Policy makers need to appreciate that there is a need to balance priorities, ensuring that new developments promote better outcomes for residents alongside the need to build high volumes of homes to meet Government targets. By ensuring places are better for residents' health there will be reduced costs to the NHS and social care. Similarly, ensuring better education outcomes there are better prospects for pupils' future ability to earn, contribute to the economy and their health (education is also a contributing factor to health outcomes according to the World Health Organization).

Sustainable locations: New residential development sites need to be planned for and delivered in the most appropriate locations to ensure they are as sustainable as possible, being well connected to jobs and promoting and enabling the use of reliable public transport, walking and cycling.

Patient funding: Greater provision of long-term patient funding is needed to support upfront infrastructure costs and ensure a mix of uses and facilities are provided from the early days of the development (see Savills Research Publication: Unlocking the Potential of Large Sites).

Provide amenities: Aside from ensuring the delivery of homes, policymakers need to encourage and support the planning and delivery of appropriate amenities on sites by considering what the local existing community and the new residents will want and need.

Allowing for local context: Policy makers need to ensure that the planning and delivery of new places does not become a tick box exercise, where just a generic set of features and amenities are delivered, which are not specific to the site or its local context. Instead, they should encourage supporting the understanding and delivery of place building that is appropriate in a site's local context and the needs of the local existing and new community who will live there.

5.2.2. Recommendations to landowners

Long-term vision: Landowners who can stay involved in the site in the long term can support place building, having a strong vision and better long-term stewardship of the site, which is likely to support better health, wellbeing and education outcomes for residents.

Consider partners: Landowners should consider choosing to work with master developers and developers who are more aligned with building a site which focusses on better place building to support better health, wellbeing and education outcomes for residents of the site.

Consider not just a financial return: Landowners should consider accepting a lower financial return to ensure a range of other uses and space can be provided on the site (such as appropriate retail, community and amenity infrastructure and quality green space), which are likely to result in better health, wellbeing and education outcomes for residents.

5.2.3. Recommendations to developers

Benefits to society and industry image: Developers who deliver better places where residents have better health, wellbeing and education outcomes not only provide better outcomes to society but can also use the experience and impact as a marketing tool to sell homes and improve the image of the company and the industry to the general public.

Consider not just a financial return: Housebuilders may need to consider accepting a lower margin to ensure that developments don't just meet housing targets but result in better health, wellbeing and education outcomes for residents. This may be measurable as adding social value.

Work with the community: By considering what the local existing community and the new residents will want and need developers can ensure the appropriate homes and place is planned for and delivered.

Work with appropriate partners: Developers should consider choosing to work with parties who have appropriate skills and expertise and can support them in delivering sites which focus on better place building to support better health, wellbeing and education outcomes for residents of the site.

Important Note

Finally, per our normal practice, we would state that this report is for general informative purposes only and does not constitute a formal valuation, appraisal or recommendation. It is only for the use of the persons to whom it is addressed, and no responsibility can be accepted to any third party for the whole or any part of its contents. It may not be published, reproduced or quoted in part or in whole, nor may it be used as a basis for any contract, prospectus, agreement or other document without prior consent, which will not be unreasonably withheld.

Our findings are based on the assumptions given. As is customary with market studies, our findings should be regarded as valid for a limited time and should be subject to examination at regular intervals.

Whilst every effort has been made to ensure that the data contained in it is correct, no responsibility can be taken for omissions or erroneous data provided by a third party or due to information being unavailable or inaccessible during the research period. The estimates and conclusions contained in this report have been conscientiously prepared in the light of our experience in the property market and information that we were able to collect, but their accuracy is in no way guaranteed.

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